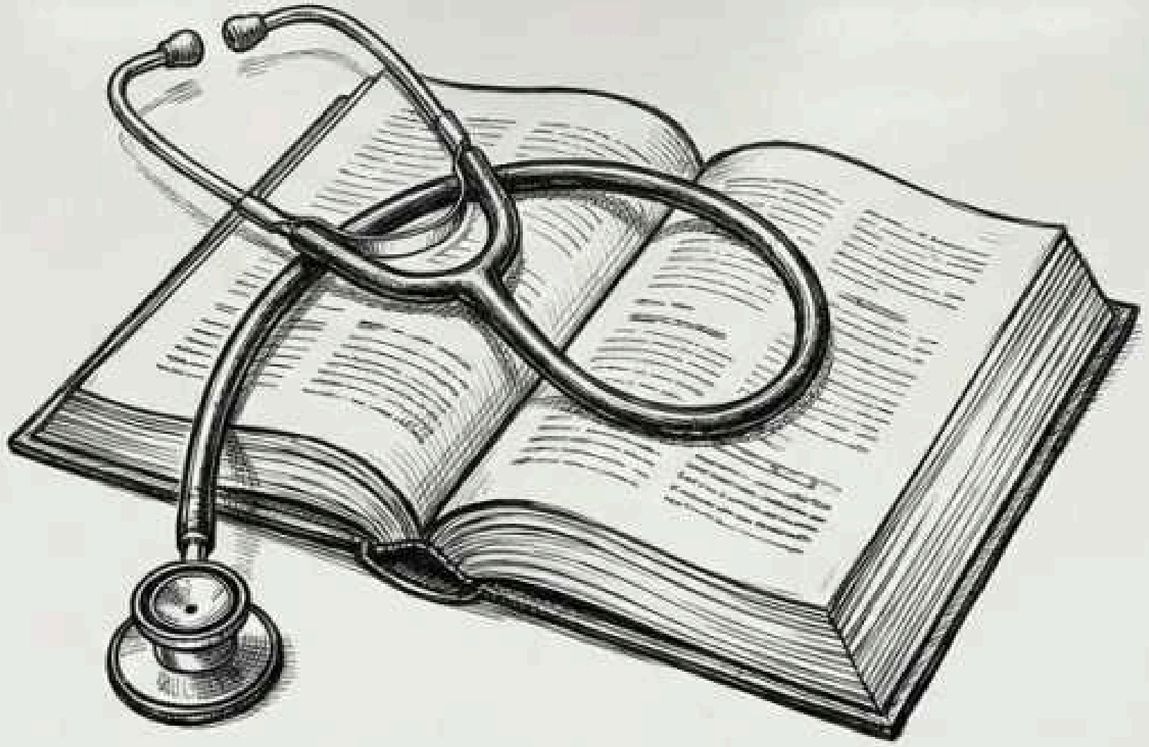
Welcome to
MED 541 B:
Internal Medicine

The first clinical clerkship of the Academy's Medical School.



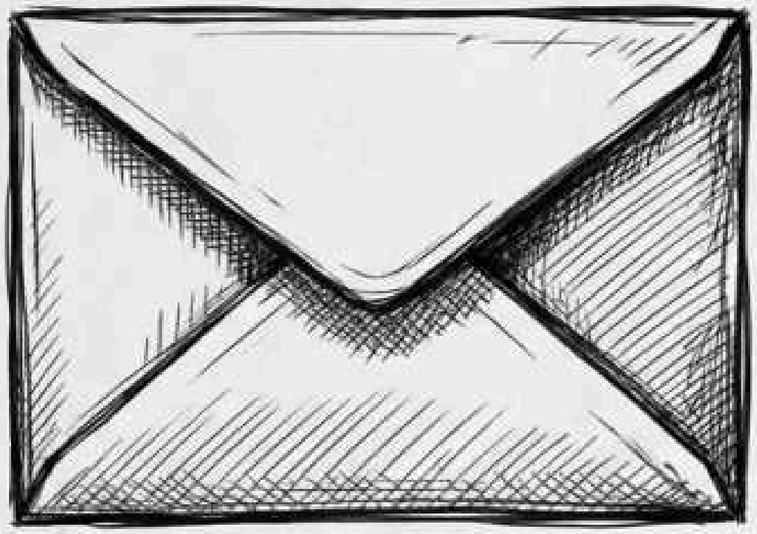
Pedagogical Model: Harvard & MIT Health Sciences and Technology (HST) core clerkship.

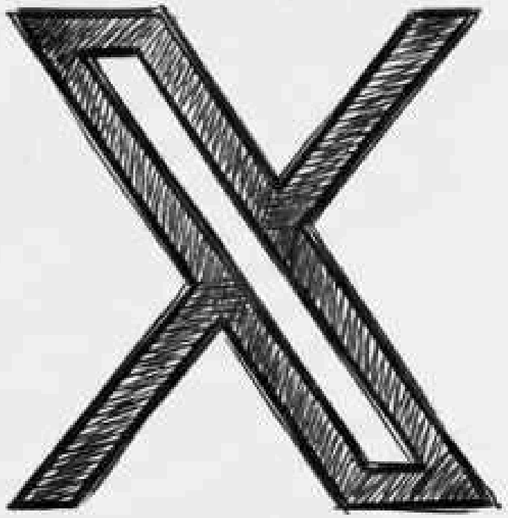
Domain: Diagnosing and treating adult diseases without surgical intervention.

$$\text{Internal Medicine} = \sum(\text{Adult Diseases}) - \text{Surgery}$$

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Questions → [Email, X]





Open Communication Channels

Feedback and questions are welcome throughout the course duration.

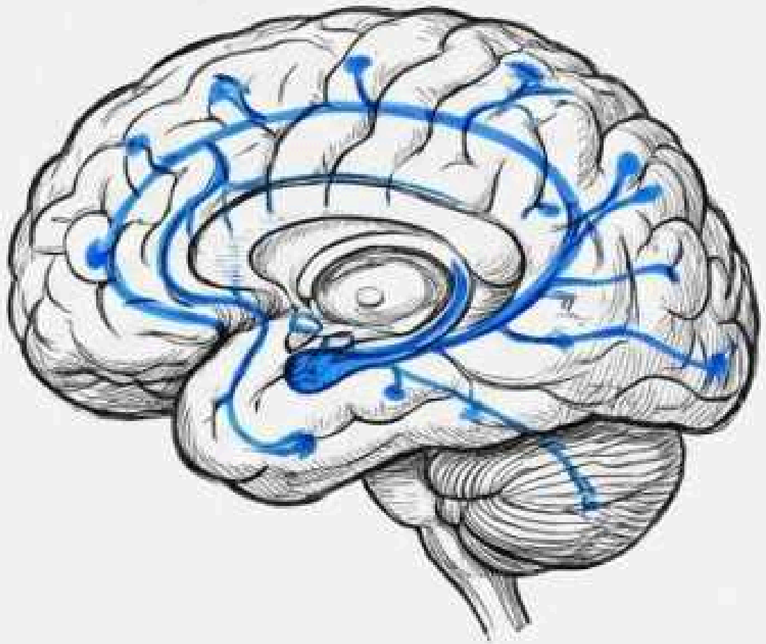
→ Email: garyanderson@mail.grokbot.com

→ X (Twitter): @garyanderson

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Course Scope: Knowledge vs. Training

This course describes the foundational knowledge that real clerkships build upon.



Didactic Knowledge

≠



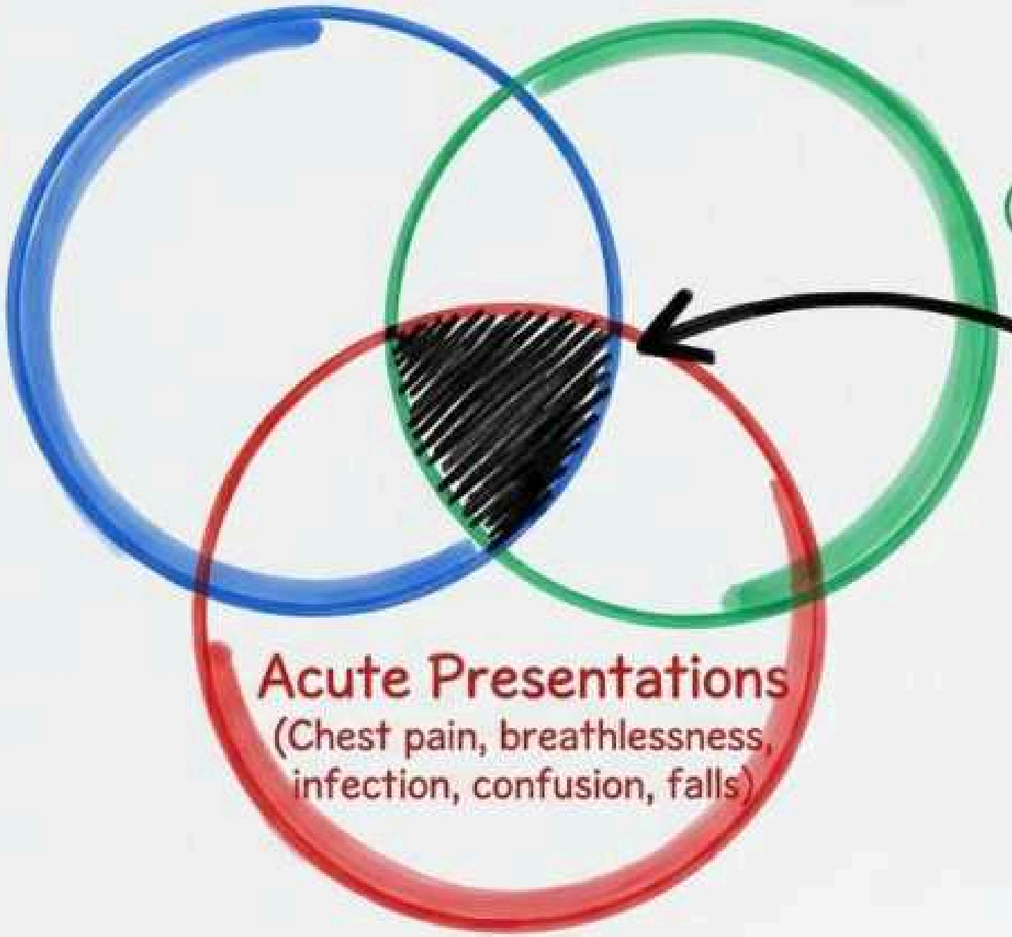
Clinical Licence

Strict Limitations:
- Not medical training or supervision.
- Grants no clinical skills or medical licensure.
- Not medical advice.

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The Internal Medicine Patient Profile

Most admitted patients require comprehensive medical team oversight due to interlocking complexities rather than single-issue ailments.

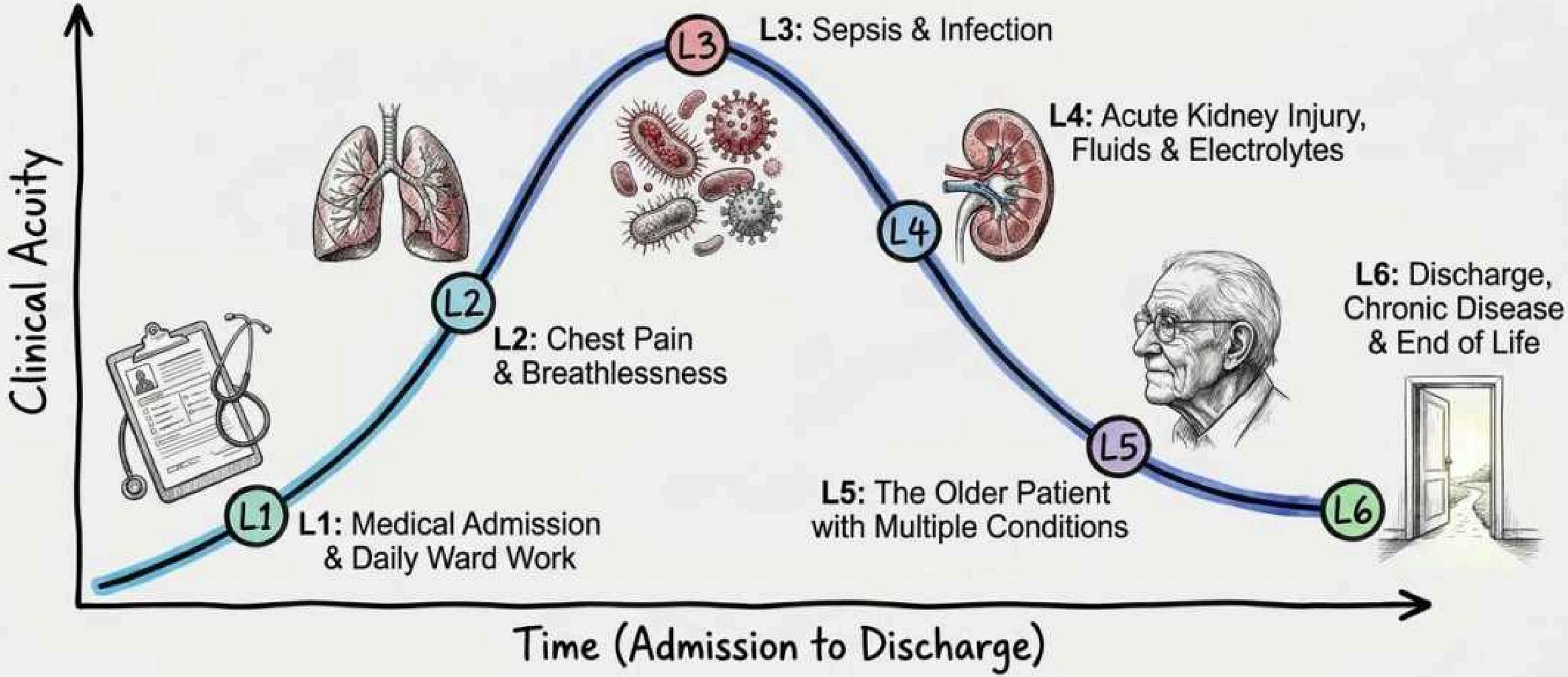


The Backbone of Hospital Care
Hospital Tears (Medical Teams)

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Course Map: MED 541 B Pathway

Six sequential lectures mirroring the lifecycle of a hospital admission.



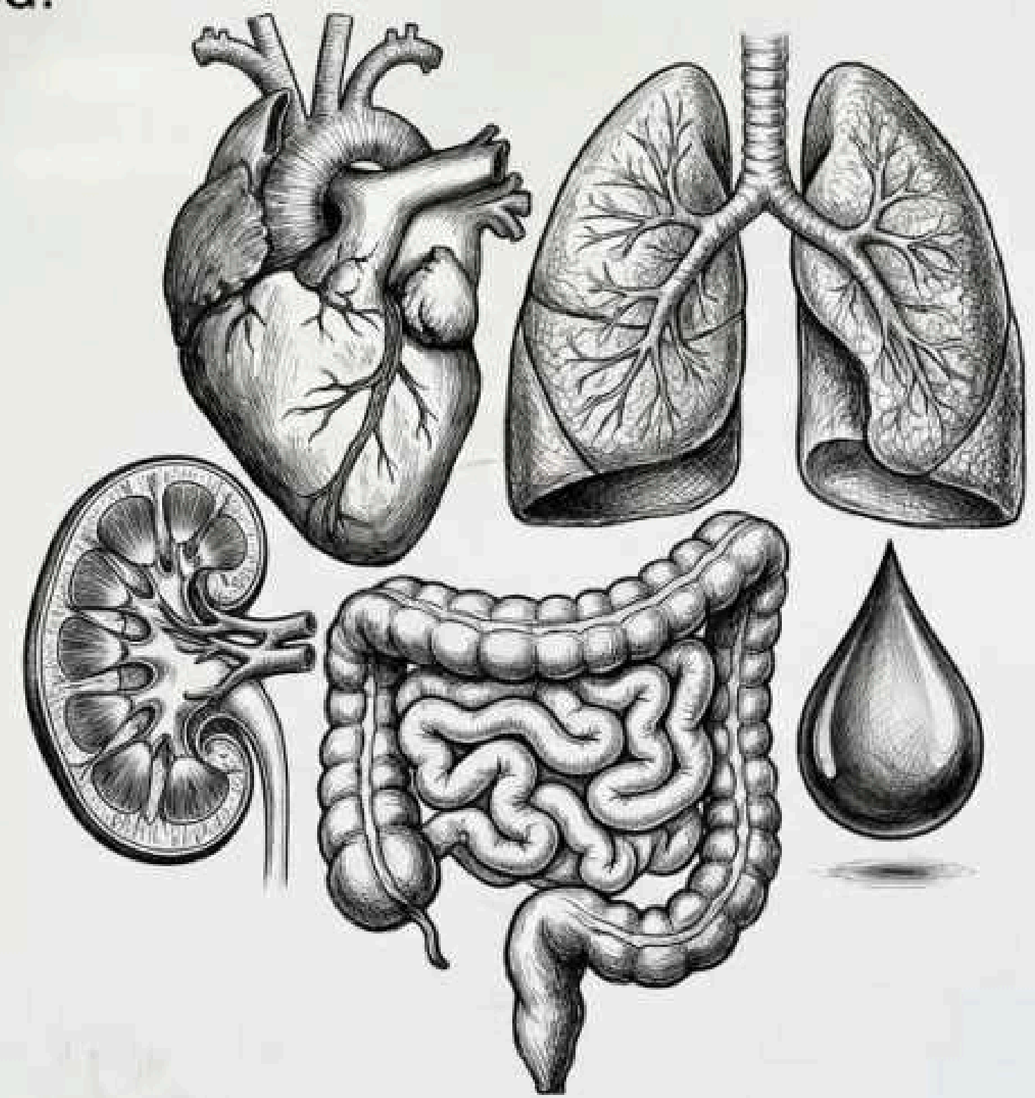
Recommended Background Variables

Full completion of Year 2 curriculum is assumed.

$$\text{MED 541 B} = f(\text{Year 2 Systems} + \text{MED 535 B})$$

Systems (MED 521 B – 525 B):
Heart, Lungs, Kidney, Gut, Blood.

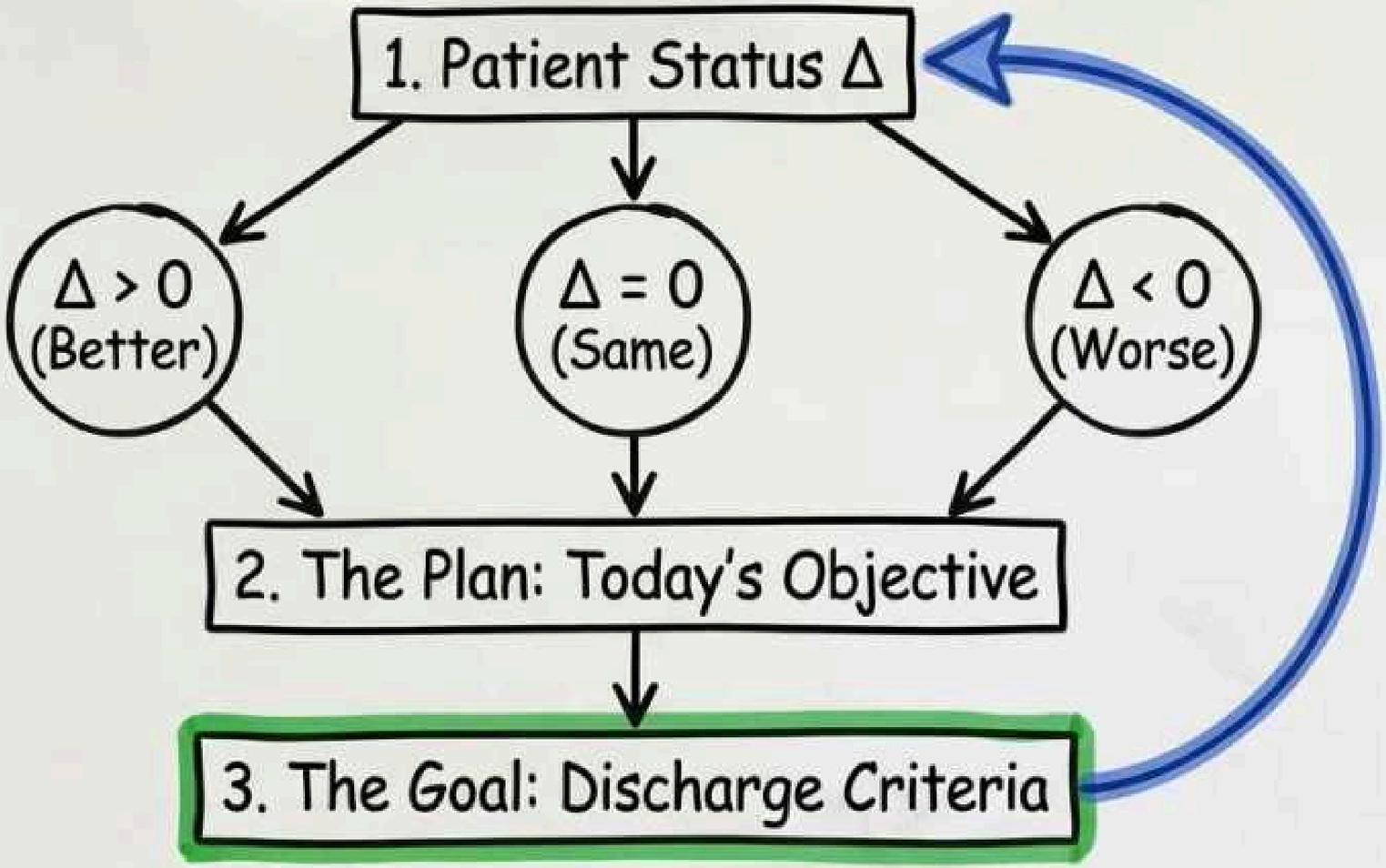
Clinical Foundation: MED 535 B
(Introduction to Clinical Medicine).



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The Daily Rounding Algorithm

A practical tip for the medical ward: Asking these three questions every morning keeps patient care moving forward safely.

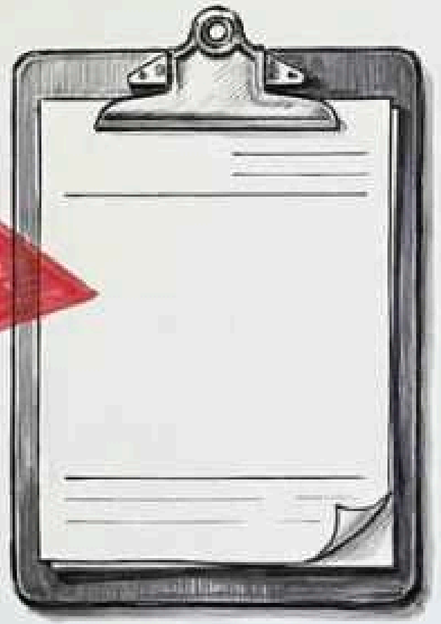


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Transitioning to Lecture One



$$\lim_{t \to \text{Admission}} \text{Patient} = L1$$



So let us begin with how a patient is admitted.

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