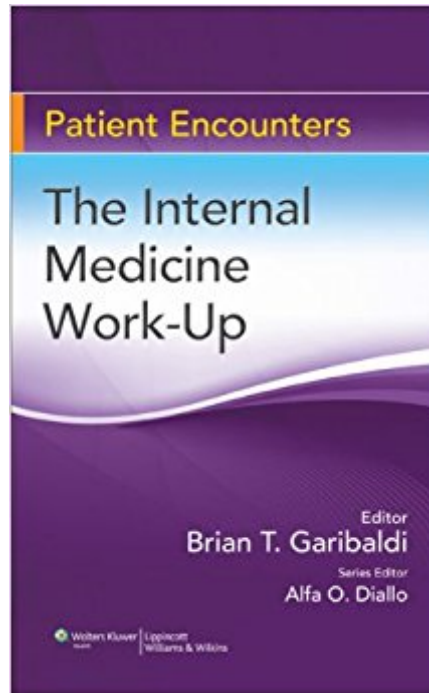




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The Internal Medicine Work-Up (Patient Encounters)



Synopsis

Patient assessment and management made easier! Ease the transition from the basic sciences to clinical medicine with this practical how-to guide to patient management. This pocket-sized book provides third- and fourth-year students with a concise, organized review of the most important patient assessment and management in internal medicine. Each chapter begins with a patient encounter, followed by an overview, acute management and work-up, extended hospital management, disposition, and suggested readings Clinical pearls are interspersed throughout the text, emphasizing clinical tips, statistics, or findings that will help students better understand the diagnosis and management Bulleted lists of key points for each chapter summarize important points to remember

Book Information

Series: Patient Encounters

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Average Customer Review: 3.8 out of 5 stars 4 customer reviews

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Customer Reviews

A good reference for the common workup of hospitalized patients.

A good, concise summary of common IM problems. Nice resource for medical students, and a good review for practicing physicians.

It is not specific to topic and the book is not formulative and not include all subject in good way

This is a great book. It is centered on the idea that you already know what the diagnosis is (there's other great differential diagnosis books out there - this isn't one of them), but assuming you got the diagnosis right, this book is a handy guide for the med student/intern who doesn't have that much experience with hospital course. When someone has a CHF exacerbation, what do you need to worry about in the first 15 minutes, first few hours, or over the course of the hospital stay? This book walks you through it and also gives you some brief background info to boot. Its probably a bit basic for the resident, but a very helpful resource for all that practical information that comes from experience but is hard to find spelled out so clearly in a reference book.

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