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Surgeons Medical Students Doctors Medical School +2

As a doctor can you name something that you learned in medical school that would surprise people? Have you had to use this knowledge in the course of your career?





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15 Answers



John Nagel, Emergency Physician

Answered May 29 · Upvoted by Liang-Hai Sie, Retired general internist, former intensive care physician. and Steven Ford, Retired GP -- primary care medical practitioner in the

I can tell with reasonable accuracy just by looking at someone from 5 feet away if they have heart disease.



Want to learn the trick to my psychic powers? Look deep into someone's eyes, then shift your gaze horizontally just a little bit and look at their ears. That's right, the secret is in the ear lobes!

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As a doctor, what is something you learned in medical school that you wish the general public

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As a doctor, what's something you've had to tell a patient that you thought was surely common knowledge?

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See that deep diagonal crease in the ear lobe? About 85% of people who have that crease also have heart disease. And, the deeper the crease, the more significant is their heart disease.

But, wait! There's more!









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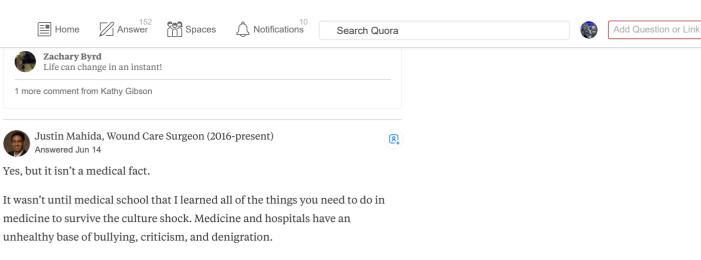
Those wiry tufts of hair coming out of the ear canal? That indicates heart disease ... (more)



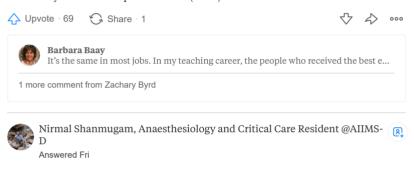


People's life's can be permanently changed in a moment for ever! A wound/injury that can't be hidden from others is truely life altering!. Career changing. And if they caused it to themselves in a stupid moment, or careless moment. Thats not the time to have someone go off on them for it.

Two examples: young 18 year old girl at party had been drinking also had done modeling for some tourist brochures like we need young blond hair girl with high cheek bones and blue eyes. She trips/falls face first into the fire. Whole head, neck, chest and one hand undergoes 2nd & 3rd degree burns. Lungs hav... (more)



You learn a lot of little things to survive. You learn that your grade and learning experience is determined by the residents and attending physicians and their overall happiness, such that anything you can do to appease them is in your best interest, from baking cookies to carrying an extra pen you don't mind losing for when they don't have a pen. You al... (more)



'Treat the patient, not the disease.'

One odd day during my medicine rotations during the 3rd semester, I heard this from a professor. At the time I immediately did not understand what it meant. But over the course of my postings in various departments I realised this - Patients come with two problems - one, the disease, and the other - the anxiety and fear related to the disease. As a doctor, we usually think it's only the former that we have a responsibility towards.

I've seen both types of doctors - one's that only treat the disease, and ones that treat both. Obviously the latter have bett... (more)



One of the most important things I learned as I went through medical school, was the absolute need to assess medical matters in a totally objective and scientific manner.

I learned never to make assumptions, until I had proven the facts with which I had been presented, and never to assume that a new pharmaceutical compound was superior to an old one.







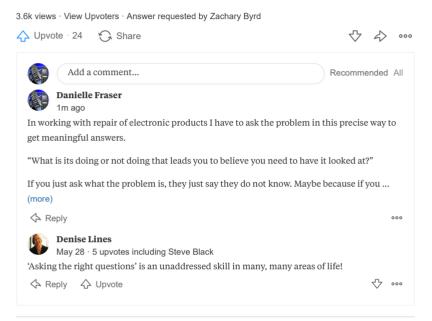


similar compound that has been available for decades, is more likely to be wrong than right!

House MD tells us that all patients lie, but that is very much an over simplification, and it is important to note that the majority of them are doing their best to present what they believe to be the truth.

I was always taught at medical school, that if you ask the right questions, your patient will tell you what is wrong with them! You need to develop the ability to interpret their answers, which is a skill that is only learned over many years and decades.





The first and most important thing I learned, and most doctors learn, is not to favor ones own solution to a problem. There is truth, what the patient actually has. Most of us are brought up to defend our own ideas, but medicine teaches humility. This lesson comes from being asked to diagnose a theoretical case, called CPC's (clinical pathological conferences). The participants are given a list of symptoms, a history and lab and x-ray data. Using that information a student can construct a diagnosis and interpret what is happening with the patient.

Fred Brindle, Retired Board Certified Neurosurgeon,

Most of the time the proposed solution falls into a few possibilities, but the truth comes at the end of the exercise. The facts are revealed sequentially, and one needs to modify ones opinion as they are revealed. That is what medicine teaches. Our first thoughts about something tend to be dear to us, but we need to be reeducated to revise and change those thoughts by being very objective about additional information.



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Statistics.

Using this knowledge to understand the difference between normal in a population and normal in a person.

Example.

I was asked by a professor to do a second opinion. His patient was suffering from a depression and in the past these depressions disappeared rapidly with a certain antidepressant. This time it did not work. My assessment of the patient did not reveal anything special. The values of the lab were all normal. Until I saw these lab values of several years earlier. Thyroid hormone is normal between 10 to 24 pg/L Her T4 was as I remember it well 14 pg/L. So that was normal. But in the notes I found the T4 several years earlier. Also within the normal range 22 pg/L. This patient had gone from High normal to Low normal. Her personal T4 was too low. When a few μg of T4 were added to the antidepressant she recovered fast.

Statistics are also very helpful to read the papers of the pharmaceutical industry.





I learned the value of thinking objectively, trusting research, not anecdotal evidence.

So many people will immediately recommend a course of treatment for a friend or family member based on what they did, as opposed to how we learn not to use ourselves as a standard reference.

Think objectively, listen to the patient, examine the findings, formulate a differential diagnosis, and pick the most likely one based on training, experience, and presentation, then recommend treatment based on research, published information, and experience.

So many people know a little, and have no idea what they don't know. It's what takes a decade of dedicated study on our parts, to know what we didn't know, learn as much as possible about the human body, and keep learning throughout our careers.



We had a quiz at medical school on pathology, a photo was shown to the class of a purple toe and the question was what medication is this person on. I don't believe anyone got that question correct. Anyway for some reason it stuck in my head.

pulled back the sheet I I chuckled to myself and said 'you're on warfarin aren't you, you've got purple toe syndrome'

Look in the fine print of side effects of warfarin and there it is.



In medical school I learned a couple of things in pediatrics that proved helpful with adults later on. One example, with an uncooperative fidgety baby you can take the blood pressure by palpation of the wrist if you can't use a stethscope because all the wriggliness creates extra noises. Another one was learning to draw blood from 11/2 pound preemies and giving a transfusion to an 11yo with leukemia through a vein in his thumb because chemotherapy had destroyed all his veins. With adults who were iv drug users for years I could take their BP by palpation and draw lithium levels when no one else could because they had ruined all their veins.



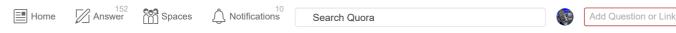
Here is a small surprise: What I really learned after Med School is that you really don't learn very much at all during Med School about what you will later do and learn in your training.

Med school is like plowing a field before you plant the seeds that grow later in your training.

So probably the most useful part of med school for me was the first 10 weeks of Gross Anatomy. When you have finished 10 weeks dissecting a single body you learn something about the deep complexities of how life is managed through your body.

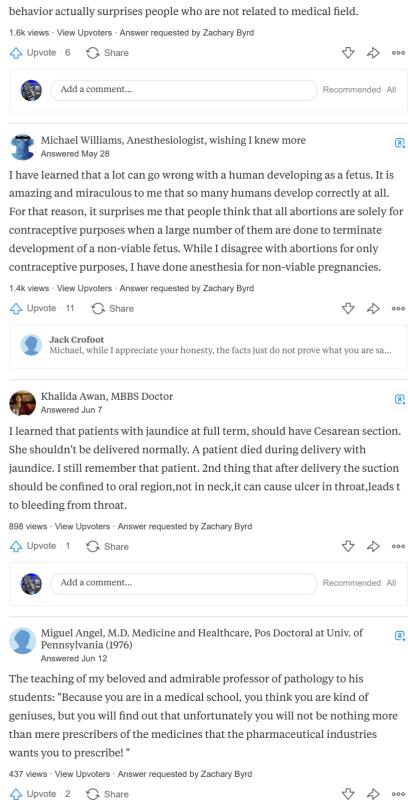
When you then learn about how it all works in life at least you have that head start on the parts.





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would not understand it. You see someone with a disease, you want to he study hard about that disease. Then you work long hours and sleepless nights to save your patient. Sometimes you fail and patient passes away and next moment you forget about that patient and start taking care of next patient. To me this behavior actually surprises people who are not related to medical field.



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Not as such, no. And especially not if you

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