

History taking part II



The scheme in history taking

1. The profile
2. chief complaint
3. history of present complaint
4. Systemic review
5. Past medical history
6. Drug history
7. Family history
8. Social history
9. Occupational history
10. Personal history

History taking II

4. Review of systems :

A. gastro intestinal tract

B. respiratory system

C. cardio vascular system

D. urogenital system .

E. Nervous system

F. musculoskeletal system

A: Gastro intestinal tract

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- * appetite, weight loss or gain
- * nausea or /and vomiting
- * haematemesis
- * dysphagia, regurgitation, heartburn,
- * abdominal pain, abdominal distension
- * Jaundice “yellow discoloration of sclera, skin, urine
- * bowel habit, rectal bleeding ,mucus, tenesmus.

B: Respiratory system

- *cough,sputum ,haemoptasis.
- *chest pain
- *exercise tolerance
- *dyspnoe ,wheezing.

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C: Cardiovascular system

- * chest pain
- * palpitation
- * dizziness
- * Dyspnoea, paroxysmal nocturnal dyspnoea, orthopnoea
- * ankle swelling
- * limb pain
- * colour change in hands or feet

D:Urogenital system

- * Loin pain,
 - * frequency of micturition
 - * poor stream
 - * dribbling
 - * hesitancy
 - * dysuria ,urgency
 - * poly urea
 - * Hematuria
 - * incontinence.
- .

Gynaecological history in female

- * Date of menarche or menopause
- * frequency ,duration and quantity of menses
- * dysmenorrhoe,
- * vaginal discharge
- * previous pregnancies and their possible complication

E:Nervous system

- * Headache
- * dizziness
- * muscle weakness
- * paraesthesia
- * History of loss of consciousness or fits
- * memory loss
- * tremor

F:Musculoskeletal system

- *Aches or pain in muscles,bones or joints
- *swollen joint
- *limitation of joint movement
- *disturbance of gait
- *Joint locking

5.Past history

Past medical history:

- * Admission to hospital, why ?
- * presence of diabetes ,hypertension
- * bleeding tendencies
- * presence of asthma,allergies.

Past surgical history:

- * Previous admission to surgical ward
- * Surgical operations or accidents
- * previous blood transfusion.

6. Drug history:

- * Ask if the patient is taking any drugs specifically
Insulin, steroids, contraceptives, antidepressants
Anti hypertensive,
- * Ask about sensitivity to any drug

7. Family history7.

- * Family illnesses: parents brothers and sisters,
- * causes of death of close relatives,
- * in a child ask about drugs during pregnancy

8. Social history:

- * Marital status ,
- * accommodation hazards,
- * travel abroad

9. Occupational history

- * type of work
- * exposure to industrial hazards i.e noises, dust

10. Personal history:

- * Smoking ,no. of cigarette
- * drinking

The profile,

Name ,

age,

marital status

occupation,

residency

date of writing history,

patient referred from,

the history taken from