

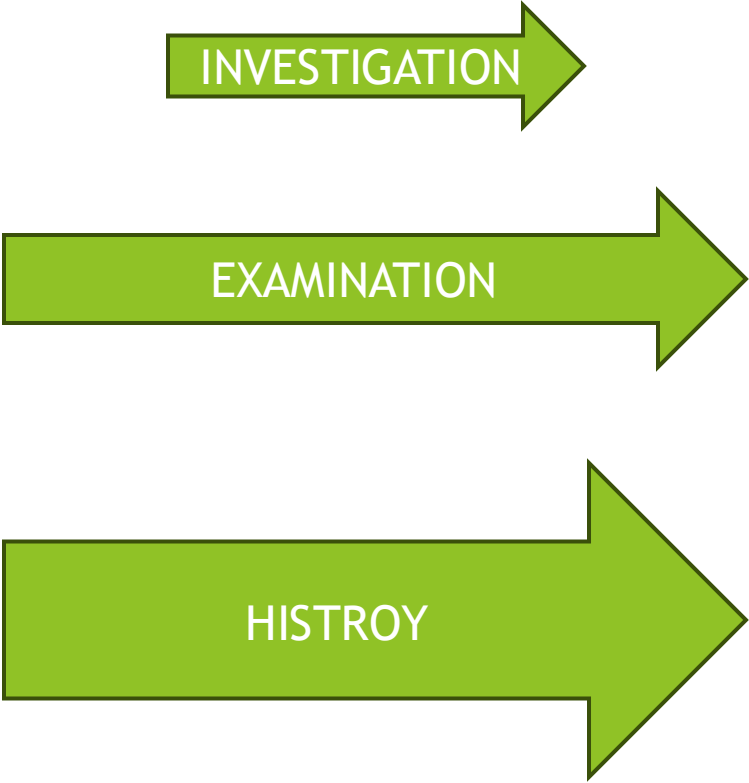
How to take history

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What is the important of history taking
?

To narrow differential
diagnosis

Introduction



Patient profile

- ▶ Patient name (1st name, Middle name, last name)
- ▶ Date of birth
- ▶ Marital status
- ▶ Route of admission
- ▶ Place where the patient live
- ▶ From which person the history has been taken.

Chief complain or reason for admission

- ▶ Up to 2 complaints.
- ▶ Duration.

RULE OF THUMB

Whenever you are discussing any complaints use open ended question.

And encourage patient to speak by their own .

Finally If the patient has nothing to till

Ask close ended question

The history of the presenting illness

- ▶ Rule number 1 : this is not story you would like to describe, you are trying to reach a differential diagnosis.
- ▶ Rule number 2 in which system the patient complain?
- ▶ Rule number 3 which symptoms of the system is positive and which is negative?
- ▶ Rule number 4 if there is a pain complaint, do you follow the SOCRATES structure?

Structure of the history of the presenting illness

- ▶ Should be within chronological order ,
- ▶ You should put all of the positive finding then you should put the negative finding, because the negative one will reduce the number of differential diagnosis.

Things should always remember

- ▶ Common is common, common is important.
- ▶ You should assume every case is life threatening so if there is chest pain you 1st exclude M.I. if for example abdominal pain you should exclude peritonitis.