History taking part I

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The steps in starting managing patient

- 1.History taking
- 2.Physical examination
- 3.Investigation
- 4.Diagnosis
- 5.Treatment plan
- 6.Follow up

Definition :

- A case history is defined as a planned professional conversation that enables the patient to communicate his/her symptoms, feelings and fears to the clinician to obtain an insight into the nature of patient illness and his/her attitude toward them.

Why do you need to take a history

- 1.Taking a patient’s history is the most important skill in medicine, it contributes 60-80% of the data for diagnosis.

- 2. It is the keystone of clinical diagnosis and the foundation for the doctor–patient relationship

Communication

- To be able to take a proper history You must be **a good communicator**

- And the requirements for good communication are :

1. Patient respect
2. Listenning skills
3. Try to establish an easy way of communication.

Important notes:

1. You are interrogating an unordinary person (Angry, uncomfortable)
2. Different intellectual & social level
3. The patient mostly does not know who you are.
4. Try to Show the patient you are caring
5. Let the patient talk

The scheme in history taking

1. The profile
2. chief complaint ,its duration
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

The profile

Introduce yourself to the patient giving your name and status as a student, permission.

1.Name

2 Age

3 sex

4. Marital status

5. Residency

6. Occupation

7.Date of attendance or admission

8.Date of history taking

9.Referred from :

Chief complaint(+duration):

- It is the reason for seeking medical care
- should be described in the patient's own words
- It is usually single complaint ,occasionally more than one i.e., chest pain and palpitation, abdominal pain and vomiting
- The suggested question asking about chief complaint :

• What is your complaint ?
• What makes you come to see the doctor ?
• What brings you to seek medical advice

History of presenting complaint

1. Elaborate on the chief complaint in details
2. Ask about relevant associated symptoms (negative and positive)
3. have in mind a possible causes for the same symptom and ask about

The pain : (SOCRATES)

S: site (where exactly is the pain?)

O: onset (when the pain started?)

C: character (what dose the pain feel like?)

R: radiation (dose the pain go anywhere else?)

A: associated symptoms (ie. Nausea/vomiting)

T: time/duration (is the pain continuous or on/off?, dose it comes in a specific time or condition?)

E: exacerbation/relieving factors (dose anything make the pain better or worse?)

S: severity (obtain an initial pain score)

Vomiting , ask about:

1. frequency
2. character
3. relation to pain
4. amount
5. Color
6. presence of blood
7. presence of food residue

Respiratory system chief complaint

1.Cough (character)

2. Sputum (color, amount)

3. Hemoptysis (color, amount)

4. Wheeze (diurnal variation?)

5. Chest Pain (site, radiation, character)

6. Shortness of breath

4.Review of systems :

A. gastro-intestinal tract

B. respiratory system

C. cardio-vascular system

D. urogenital system .

E. Nervous system

F. musculoskeletal system

5.History (past)

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 history:

*Family illnesses: parent's brothers and sisters.

*causes of death of close relatives.

*in a child ask about drugs during pregnancy.

8.Social history:

- Marital status.
- travel abroad.

9. Occupational history

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

10.Personal history:

- Smoking, no. of cigarette.
- drinking.