47 Taking a history 1

A A full case history

A full case history covers:

- personal details
- presenting complaint
- past medical history (PMH)
- **drug history** (see Unit 48)
- **family history** (see Unit 48)
- social and personal history (see Unit 48)
- patient ideas, concerns and expectations (see Unit 49)
- review of systems (see Unit 49).

Personal details

Normally, patients' personal details have been entered in their records by a nurse or administrative staff before a doctor sees them. However, on later consultations a doctor may wish to check details such as address, date of birth, occupation or marital status.

To find out or to check a patient's occupation, doctors ask:

Do you work?

What do you do for a living?

Patients may respond:

No, I'm unemployed.

I'm out of work.

No, I'm retired.
I'm a pensioner.

Yes, I work for a bank.

I'm a pensioner.

I work in a factory.

To find out or to check a patient's marital status, doctors ask:

Do you have a partner?

Patients may respond:

No, I'm

single. separated. divorced. Yes, I'm married.

I live with my

spouse. husband. wife.

No, I'm a

widow. widower. divorced. My spouse passed away last year.

Note: A spouse can be a wife or husband. A widow is a woman whose husband is no longer living; a widower is a man whose wife is no longer living. To avoid saying someone is dead, patients may say that person has passed away.

Talking about pain

Case notes are kept for each consultation. The Presenting Complaint section of case notes records the patient's symptoms. For example:

R. síded temporal headache, severe, throbbing.

Lasts 24-48 hrs.

In this case, the patient complains of a headache. For a list of the questions the doctor asked this patient, and for patients' descriptions of other kinds of pain, see Appendix IV on page 144.

47.3

47.

47.2

47.1 Study the case notes. Write the questions the doctor asked to obtain the numbered information. Look at Appendix IV on page 144 to help you.

ADDRESS Acredales, Eridgethorpe D.O.B. 30/4/79 OCCUPATION bank clerk (2) Presenting complaint c/o severe headache, boring in nature (3), mainly in and around R	MARITAL STATUS married (1)
OCCUPATION bank clerk ⁽²⁾ Presenting complaint	MARITAL STATUS married (1)
Presenting complaint	
Can radiate to forehead ⁽⁵⁾ . Comes on at any time ⁽⁶⁾ and can vary factors. Has noticed haloes around lights with some blurry vision in R eyy	n duration 1-2hrs $^{(au)}$. No precipitating $^{(arepsilon)}$ or relieving $^{(arepsilon)}$

47.2 Read the continuation of the case notes for the patient in C opposite. Write the doctor's questions. Look at Appendix IV on page 144 to help you.

PMH similar headaches 10 yrs, coming every 3 mths. Often premenstrual. Aggravated by eating chocolate; relieved by lying in dark room. Can have visual aura, blurred vision, nausea + s.t.s vomiting.

	Can you tell me what the problem is?	
	I've got a terrible headache.	2
	(1)	
	Just here.	
	(2)	5
Patient:	Well, it's really bad. And it throbs.	
Doctor:	Have you had anything like this before?	
Patient:	Yes, about every three months. I've had them for the last ten years or so.	
	(3)	5
Patient:	Usually one or two days. This one started yesterday morning.	
Doctor:	(4)	?
Patient:	They usually start just before my period. Sometimes if I eat chocolate. I'm not sure.	
Doctor:	(5)	?
Patient:	If I lie down in a dark room it helps. Light makes them worse.	
Doctor	(6)	?
Patient:	If I move my head, it gets more painful.	
Doctor:	Apart from the headache, (7)	?
Patient:	Yes, my eye feels strange. Sometimes I can't see clearly, things get blurred. I feel sick an sometimes I am sick.	d

47.3 Complete the sentences. Look at Appendix IV on page 144 to help you.

1	Gastric ulcers are associated with a pain.
2	Cystitis causes pain on passing urine.
	Patients with a peptic ulcer may say they have a pain.
4	Recurrent abdominal pain (RAP) may be described as or
	Migraine is often described as apain.
	People with osteoarthritis often complain of a deep centred in the joint.
	Kidney stone pain is sudden, severe and
8	Angina is usually described as a crushing or heavy orpain.

Over to you



Choose at least three common conditions and make a note of how patients would describe the pain in English.

Taking a history 2

Drug history

Here is an extract from a medical textbook.

It is essential to obtain full details of all the drugs and medications taken by the patient. Not infrequently patients forget to mention, or forget the name of, drugs they take. Some may be over-the-counter remedies unknown to the general practitioner. The significance of others, such as herbal remedies or laxatives, may not be appreciated by the patient.

It is necessary to determine the precise identity of the drug, the dose used, the frequency of administration and the patient's compliance or lack of it.

It is important to ask about known drug allergies or suspected drug reactions and to record the information on the front of the notes to be obvious to any doctor seeing the patient. Failure to ask the question or to record the answer properly may be lethal.

To find out about drug history, doctors ask:

Details of drugs and medications

- Are you taking any medication at the moment?
- Which tablet do you take?
- Do you use any over-the-counter remedies or herbal or homeopathic medicines?

Frequency of administration

How many times a day?

Side-effects and allergies Do you get any side effects? Compliance

- Do you always remember to take it?
- Do you know if you are allergic to any drug? If the answer is Yes: What symptoms do you get after taking it?

Family history

Note the age, health or cause of death of parents, siblings (brothers and sisters), spouse (husband or wife), and children. To find out about family history, doctors ask:

- Do you have any brothers and sisters?
- Do you have any children?
- Are all your close relatives alive?
- Are your parents alive and well?
- Is anyone taking regular medication?
- How old was he when he died?
- Do you know the cause of death? / What did he die of?
- Does anyone in your family have a serious illness?

Social and personal history

Record the relevant information about occupation, housing and personal habits including recreation, physical exercise, alcohol and tobacco and, in the case of children, about school and family relationships. Typical questions in taking a social and personal history are:

- What kind of house do you live in?
- Do you live alone?
- Who shares your home with you?
- How old are your children?
- Are any of them at nursery or school?
- What's your occupation?
- Do you have any problems at work?
- Do you have any financial problems?
- Do you have any hobbies or interests?
- What about exercise?

- Do you smoke?
- How many a day?
- Have you tried giving up?
- What about alcohol?
- Wine, beer or spirits?
- Can you give up alcohol when you want?
- How much do you drink in a week?
- What's the most you would drink in a week?
- Are you aware of any difference in your alcohol consumption over the past five years?

48.1

48.2

48.3

48.1	Complete the sentences. Look at A, B and C opposite to help you.
,	1 Pharmacies sell a wide variety of
48.2	Write the doctor's questions. Look at B opposite to help you.
	Doctor: (1)
48.3	Study the social history of Mr Black. Write the questions the doctor asked to obtain the numbered information. Look at C opposite to help you. Social history: Mr G. Black Home – Lives in a detached house with a large garden ⁽¹⁾ . Family – Four children: two girls aged 3 and 4, two boys aged 6 and 8. All are being taught at home by his wife ⁽²⁾ . Occupation – Manager of a DIY warehouse. Stressful job involving dealing with frequent staff problems and meeting monthly sales targets. Large mortgage ⁽³⁾ . Personal interests – Has little time for exercise or interests outside work ⁽⁴⁾ . Habits – Presently smoking 20 per day ⁽⁵⁾ . Has tried nicotine patches without success ⁽⁶⁾ . Average alcohol intake 3 units per day at weekends ⁽⁷⁾ . No problem with alcohol withdrawal ⁽⁸⁾ .
	withdrawar .

Over to you
Write a social history of a patient you know. Make a note of the questions you would ask

to obtain the information.