

Patient Encounter Structure

Checking Doorway Information

- Full Name
- Age
- Sex
- Chief Complaint
- Vital Signs
 - *Blood Pressure*
 - *Body Temperature*
 - *Respiratory Rate*
 - *Heart Rate*

1. Greeting & Introduction

2. Chief Complaint (ICE & DNA)

3. History of Present Illness (OPQRST)

4. Risk Factors (PAM HITS FOSS)

5. Summary

6. Diagnostic Impression

7. Follow-up Plan

8. Counseling

9. Q&A

Patient Encounter Basic Expressions

I. Greeting & Introduction

Greeting "Hello."
Confirming your patient's full name <ul style="list-style-type: none">"Are you Mr John Smith?""Are you Ms Jane Smith?"
Introducing your name and title "My name is Takayuki Oshimi, one of the <u>student doctors</u> at this hospital."
Describing your role "I'll be helping you today."
Asking for a permission "Would that be all right with you?"

History Taking

2. Chief Complaint (ICE & DNA)
3. History of Present Illness (OPQRST)
4. Risk Factors (PAM HITS FOSS)

2. Chief Complaint (ICE & DNA)

"How can I help you today?"
"Could you tell me more about the (chief complaint)?"
I deas "Do you have any ideas about it yourself?"
C oncerns "Is there anything particular that you are concerned about?"
E xpectations "What are your expectations about this visit today?"
D ay "How does it affect your day ?"
N ight "How does it affect your night ?"
A ctivities "How does it affect your activities of daily living ?"

3. History of Present Illness (OPQRST)

Onset

- “When did the (symptom) start?”
- “When did you first notice the (symptom)?”
- “Did it start suddenly or gradually?”

Provoking & **P**alliating Factors

- “What makes the pain worse?”
- “What makes the pain better?”

Quality

- “Could you describe the (symptom)?”
- “What type of pain is it?”
- “Is the pain sharp or dull?”

Region & **R**adiation

- “Could you show me where it hurts?”
- “Does the pain move anywhere else?”

Severity

“On a scale of one to ten, ten being the worst pain you can imagine, how severe is the pain now? How severe was it when it started?”

Symptoms (relevant to differential diagnosis)

- “Do you have (symptom: **noun**)?”
- “Do you feel (symptom: **adjective**)?”
- “Have you noticed any change in (**habit**)?”
- “Has anyone you know noticed any change in your (**appearance**)?”
- “Have you been (**verb**)ing more than usual?”
- “Sometimes patients with (chief complaint) have (symptom: **noun**). Has this happened to you?”

Timing

- “How long/many hours/many days/many weeks have you been having the (symptom)?”
- “Does the (symptom) come and go or do you have it all the time?”

4. Risk Factors (PAM HITS FOSS)

Previous presence of the same symptom

- *“Have you ever had the same symptom before?”*
- *“Was it exactly the same as now?”*

Allergies (medications & food)

- *“Are you allergic to any medications/food/anything else?”*
- *“What happened when you got the allergy?”*

Medications (prescription drug, OTC, and nutritional supplements)

- *“Are you currently on any medications/supplements?”*
- *“Do you take it as the doctor prescribed?”*

HITS (Past Medical History)

Hospitalization

“Have you ever been hospitalized?”

Illness

“Have you ever had any serious health problems in the past?”

Trauma

“Have you ever had any major injuries in the past?”

Surgery

“Have you ever had any surgeries/operations in the past?”

Family History

- *“Do any health problems run in your family?”*
- *“Does anyone in your family have similar symptoms?”*
- *“Does anyone in your family have (specific disease)?”*

Full Transitions*

*Necessary when asking about **ObGyn**, **Sexual History**, and **Social History***

- Introducing the new topic

“I will now be asking you some questions about your sexual life.”

- Reassuring the patient

“These are some routine questions I ask all my patients.”

- Provide confidentiality

“Any information you provide will be completely confidential.”

- Obtain permission

“Would that be all right with you?”

4. Risk Factors (PAM HITS FOSS) (cont'd)

Obstetrics & Gynecology (**Full Transitions*** required)

- “When was your last monthly period?”
- “Is there any possibility that you may be pregnant?”
- “Have you ever been pregnant in the past?”

Sexual History (**Full Transitions*** required)

- “Are you currently sexually active?”
- “How many sexual partners have you had in the past 12 months?”
- “Do you have sexual intercourse with men, women, or both?”

Social History: **SODA** (**Full Transitions*** required)

Smoking

- “Do you smoke?”
- “How many cigarettes do you smoke per day?”
- “How long have you been smoking?”

Occupation

- “What is your occupation?”
- “How are things at home?”

Drugs

- “Have you ever used any recreational drugs in the past?”
- “Which drugs do/did you use?”

Alcohol

- “Do you drink alcohol?”
- “How many drinks do you have in a week?”

CAGE Questionnaire*

*If the patient reports more than **14** standard drinks per week (7-10 drinks per week for female patients)

Cut down

“Have you ever felt you should **CUT DOWN** on your alcohol consumption?”

Annoyed

“Have you ever felt **ANNOYED** when someone criticizes your drinking habit?”

Guilty

“Have you ever felt **GUILTY** about your drinking habit?”

Eye opener

“Have you ever had a drink first thing in the morning?” (**EYE OPENER**)

5. Summary

- “Let me summarize your story.”
- “You have come to this hospital because (Chief Complaint + Significant Symptoms + Significant Risk Factors).”
- “Is that correct?”

6. Diagnostic Impression

- “Mr Smith, let’s discuss some possible diagnoses for your case. After taking your history, there are several possibilities.”
- “One of them is a problem called (**most likely but least serious diagnosis**), which is a common disease that can produce symptoms like the ones you have.”
- “We still need to run some tests to make sure it is not something else.”
- “We need to also check for (**more serious diagnosis**), and also we need to check for (**most serious diagnosis**).”

7. Follow-up Plan

- “Mr Smith, we will be running some tests to confirm what is causing your symptoms.”
- “I am ordering some **blood tests** to see if there is any sign of (**condition**).”
- I would also like to get a (**imaging test**) of your (**body part**) to see if your (**body part**) is normal.”

8. Counseling

- ~~You should quit...~~ (forceful)
- “I usually recommend all my patients quit...” (gentle)
- “Mr Smith, you mentioned during the history that you are a smoker, is that correct? **I usually recommend all my patients quit smoking** in order to avoid health problems. Have you ever considered quitting? If you want, I can introduce you to our support group here at the hospital. We have an excellent team that can help you quit smoking.”

9. Q&A

“Mr Smith, do you have any questions for me?”

Challenging Question 1: “I have been waiting here for 3 hours! Why have you kept me waiting so long?”

Challenging Question 2: “I can’t afford the cost of staying in the hospital. I have no insurance. Can you give me something to relieve the pain?”

Challenging Question 3: “My father had lung cancer. What is the possibility that I will have lung cancer as well?”

5-Step Strategy for Challenging Questions

Step 1: Express your interest in your patient’s concern

- *“Could you tell me more about your concern?”*

Step 2: Restate your patient’s concern to express your understanding

- *“I understand that your main concern is...”*
- *“I understand that you feel frustrated by...”*
- *“I understand your concern about...”*

Step 3: Reassure your patient using the **PEARLS technique**

- **P**artnership: *“Let’s deal with this together.”*
- **E**mpathy: *“That sounds hard.”*
- **A**pology: *“I’m sorry this happened to you.”*
- **R**espect: *“You obviously have worked hard on this.”*
- **L**egitimization: *“Anyone would be upset by this situation.”*
- **S**upport: *“I’ll be here when you need me.”*

Step 4: Give your honest but diplomatic answer to the question

- *“I understand that you are concerned about medical costs, but your life will be in danger if you don’t have surgery. Let our social workers help you with the cost issues.”*
- *“I cannot answer that question at this time. Let’s wait for the test results and discuss the issue when we have more information.”*

Step 5: Ask if your patient has more questions

- *“Does that answer your question?”*
- *“Do you have any other questions?”*