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978-0-521-60666-0 - English in Medicine: A Course in Communication Skills
Eric H. Glendinning and Beverly A. S. Holmstrom
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1 Taking a history 1

Section 1 Asking basic questions

Task 1

You will hear an extract from an interview between a doctor and his patient. As you listen, complete the Present Complaint section of the case notes below.

SURNAME Hall		FIRST NAMES Kevin
AGE 32	SEX M	MARITAL STATUS M
OCCUPATION Lorry driver		
PRESENT COMPLAINT		

Now compare your notes with those made by the doctor. These are given in the Key on p. 105. Explain these sections in the notes.

1 SEX M

2 MARITAL STATUS M

3 3/12

4 a.m.

5 "dull, throbbing" Why are these words in quote marks (" ")?

6 c/o

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Language focus 1

Note how the doctor starts the interview:
– *What's brought you along today?*

Other ways of starting an interview are:
– *What can I do for you?*
– *What seems to be the problem?*

Note how the doctor asks how long the problem has lasted.
– *How long have they been bothering you?*

Another way of asking about this is:
– *How long have you had them?*

Task 2

Study this short dialogue.

DOCTOR: Well, Mrs Black. *What's brought you along today?*
PATIENT: I've got a bad dose of flu. (1)
DOCTOR: *How long has it been bothering you?*
PATIENT: Two or three days. (2)

Practise this dialogue. Your partner should play the part of the patient. He or she can select replies from lists (1) and (2) below. Use all the ways of starting an interview and asking how long the problem has lasted.

(1)	*(2)*
a bad dose of flu	two or three days
terrible constipation	since Tuesday
swollen ankles	a fortnight
a pain in my stomach	for almost a month

Language focus 2

Note how the doctor asks where the problem is:
– *Which part of your head is affected?*

Other ways of finding this out are:
– *Where does it hurt?**
– *Where is it sore?**

Note how the doctor asks about the type of pain:
– *Can you describe the pain?*

Other ways of asking this are:
– *What's the pain like?*
– *What kind of pain is it?*

* *Hurt* is a verb. We use it like this: *My foot hurts.*
Sore is an adjective. We can say: *My foot is sore* or *I have a sore foot.*

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Task 3

Practise finding out information like this. Work in the same way as in Task 2. Use all the methods given in Language focus 2 in your questioning.

DOCTOR: *Which part of your head (chest, back, etc.) is affected?*
PATIENT: Just here.
DOCTOR: *Can you describe the pain?*
PATIENT: It's a dull sort of ache. (1)

(1)
a dull sort of ache
a feeling of pressure
very sore, like a knife
a burning pain

Language focus 3

Note how the doctor asks if anything relieves the pain of headaches:
– *Is there anything that makes them better?**

Similarly he can ask:
– *Does anything make them worse?*

Doctors often ask if anything else affects the problem. For example:
– *What effect does food have?*
– *Does lying down help the pain?*

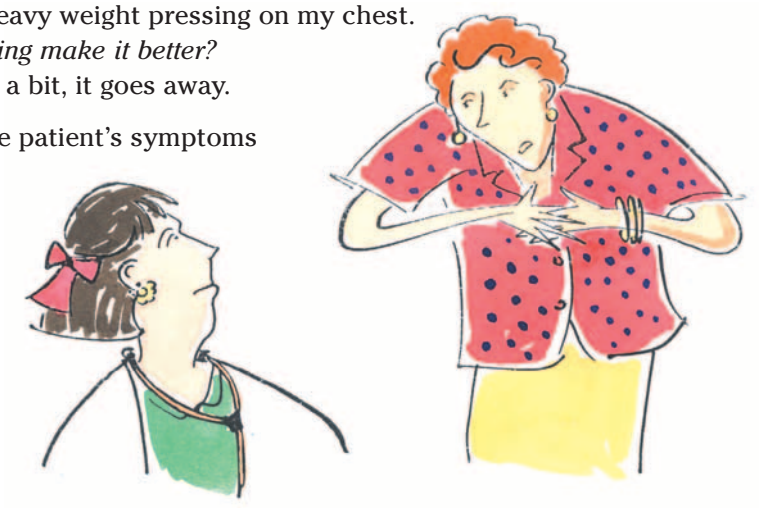
* *Better* means *improved* or *relieved*. It does not mean *cured*.

Task 4

Work with a partner. In each of these cases, ask your partner where the pain is. Then ask two other appropriate questions to help you reach a diagnosis. There is a diagram in the Key showing your partner where to indicate in each case. Use all the ways of questioning we have studied in this section. For example:

DOCTOR: *Where does it hurt?*
PATIENT: Right across here. (indicating the central chest area)
DOCTOR: *Can you describe the pain?*
PATIENT: It's like a heavy weight pressing on my chest.
DOCTOR: *Does anything make it better?*
PATIENT: If I stop for a bit, it goes away.

In this example, the patient's symptoms suggest angina.



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Now try each of these four cases in the same way.

1 DOCTOR: .....
PATIENT: Here, just under my ribs. (1)
DOCTOR: .....
PATIENT: It gets worse and worse. Then it goes away.
DOCTOR: .....
PATIENT: Food makes it worse.

2 DOCTOR: .....
PATIENT: It's right here. (2)
DOCTOR: .....
PATIENT: It's a gnawing kind of pain.
DOCTOR: .....
PATIENT: Yes, if I eat, it gets better.

3 DOCTOR: .....
PATIENT: Down here. (3)
DOCTOR: .....
PATIENT: It's a sharp, stabbing pain. It's like a knife.
DOCTOR: .....
PATIENT: If I take a deep breath, or I cough, it's really sore.

4 DOCTOR: .....
PATIENT: Just here. (4)
DOCTOR: .....
PATIENT: My chest feels raw inside.
DOCTOR: .....
PATIENT: When I cough, it hurts most.

Task 5

Work in pairs. Student A should start.

A: Play the part of the doctor. Repeat Task 4 but add two or three more questions in each case to help you decide on a diagnosis. For instance, in the example where the patient's symptoms suggest angina, you could ask:
– *Does anything make it worse?*
– *How long does the pain last?*
– *Is there anything else you feel at the same time?*

B: Play the part of the patients. Use the replies in Task 4 and the extra information in the Key to help you.

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Section 2 Taking notes

Task 6

These notes show the doctor's findings when he examined Mr Hall. Note the explanations given for the abbreviations used. What do the other ringed abbreviations stand for?

SURNAME	FIRST NAMES
AGE SEX	MARITAL STATUS
OCCUPATION	
PRESENT COMPLAINT	
O/E General Condition obese, 1.65m tall, 85 kg	
ENT wax ++ both sides	
RS NAD	
CVS P 80/min reg. BP 180/120	
HS normal	
GIS	
GUS	
CNS Fundi normal	
IMMEDIATE PAST HISTORY	
POINTS OF NOTE	
INVESTIGATIONS Urine -ve for sugar and albumen	
DIAGNOSIS ? hypertension	
MANAGEMENT See 1/52	

Ear, Nose, Throat

Nothing abnormal detected

regular

Pulse

Heart sounds

Gastro-intestinal system

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Task 7

Study this letter from a GP to a consultant. Write down the questions which a doctor might ask to obtain the information ringed in the letter. For example:

4 *How long did it last?*

8 *What was the cause of death?*

CLINICAL DETAILS

Date Oct 3rd 2004

Dear Dr Scott

I would be grateful for your opinion and advice with regard to

(Name) GREEN, Peter

URGENT
Please indicate in the box ☐

A brief outline of history, symptoms and signs and present therapy is given below:

This 42-year-old (1) salesman had a severe attack of (2) central chest pain (3) six months ago which (4) lasted 10 mins and was (5) relieved by rest. This has recurred several times (6) after exertion. His father (7) died aged 56 of a (8) coronary thrombosis. Physical examination was normal and I refer him to you for further assessment in view of his age.

Diagnosis: angina

Thank you for seeing him.

Yours sincerely,

If transport required please state: ☒ YES ☐ NO

Stretcher/Sitting case

Sitting case – two man lift

Signature Mary Chapman

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Task 8

The hospital consultant made these notes of her interview with Mr Green. Complete as many of the gaps as you can with the help of the letter on p. 10.

Then listen to the recording and complete the remaining gaps. Use the abbreviations you have studied in this unit.

SURNAME .....(1)	FIRST NAMES Peter
AGE .....(2) SEX M	MARITAL STATUS M
OCCUPATION .....(3)	
PRESENT COMPLAINT .....(4) chest pain radiating to L arm. Started with severe attack c dyspnoea. Pain lasted .....(5) relieved by rest. Has occurred since on exertion.	
O/E General Condition ENT RS Chest .....(6) CVS .....(7) 70/min .....(8) 130/80 .....(9) normal GIS GUS CNS	
IMMEDIATE PAST HISTORY	
POINTS OF NOTE	
INVESTIGATIONS	
DIAGNOSIS	

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Task 9

Study these case notes. What questions might the doctor have asked to obtain the information they contain?

a)

SURNAME James		FIRST NAMES Robert
AGE 48	SEX M	MARITAL STATUS S
OCCUPATION Builder		
PRESENT COMPLAINT % frontal headache 4/7 following cold. Worse in a.m. and when bending down. Also % being "off colour" and feverish.		
POINTS OF NOTE Analgesics c some relief.		

b)

SURNAME Warner		FIRST NAMES Mary Elizabeth
AGE 34	SEX F	MARITAL STATUS D
OCCUPATION Teacher		
PRESENT COMPLAINT % episodic headaches many years, lasting 1–2 days every 3–4 months. Pain behind eyes c nausea. "tightness" back of head. Depressed c pain, interfering c work.		

Task 10

Work in pairs and try to recreate the consultation. Student A should start.

A: Play the part of the patients. Use the case notes as prompts.

B: Play the part of the doctor. Find out what the patient is complaining of. Do not look at the case notes.

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Section 3 Reading skills: Scanning a case history

Task 11

Read the following case history and find and underline this information about the patient as quickly as you can.

1 previous occupation

2 initial symptoms

3 initial diagnosis

4 condition immediately prior to admission

5 reason for emergency admission

6 duration of increased thirst and nocturia

7 father's cause of death

8 alcohol consumption

CASE HISTORY

Mr Wildgoose, a retired bus driver, was unwell and in bed with a cough and general malaise when he called in his general practitioner. A lower respiratory tract infection was diagnosed and erythromycin prescribed. Two days later, at a second home visit, he was found to be a little breathless and complaining that he felt worse. He was advised to drink plenty and to continue with his antibiotic. Another 2 days passed and the general practitioner returned to find the patient barely rousable and breathless at rest. Emergency admission to hospital was arranged on the grounds of 'severe chest infection'. On arrival in the ward, he was unable to give any history but it was ascertained from his wife that he had been confused and unable to get up for the previous 24h. He had been incontinent of urine on a few occasions during this time. He had been noted to have increased thirst and nocturia for the previous 2 weeks.

His past history included appendicectomy at age 11 years, cervical spondylosis 10 years ago, and hypertension for which he had been taking a thiazide diuretic for 3 years. His father had died at 62 years of myocardial infarction and his mother had had rheumatoid arthritis. His wife kept generally well but had also had a throat infection the previous week. Mr Wildgoose drank little alcohol and had stopped smoking 2 years previously.

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Section 4 Case history: William Hudson

Task 12

In this section in each unit we will follow the medical history of William Hudson. In this extract he is visiting his new doctor for the first time. As you listen, complete the personal details and Present Complaint section of the case notes below.

SURNAME Hudson		FIRST NAMES William Henry
AGE	SEX	MARITAL STATUS
OCCUPATION		
PRESENT COMPLAINT		

Task 13

Work in pairs and try to recreate the consultation. Student A should start.

A: Play the part of William Hudson. Use the case notes to help you.

B: Play the part of the doctor. Find out what the patient is complaining of. Do not look at the case notes.

The case of William Hudson continues in Unit 2.

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