

HISTORY TAKING & EXAMINATION

KEYPOINTS

- It should be in paragraph like a story
- Complaints should be in chronological order
- It should be in patient's words
- It should guide clinician
 - to form a provisional diagnosis
 - to plan examination
 - to plan investigations

IDENTIFICATION DATA

- Name Age Residence Occupation
Education
- Religion sex married
- Booked/ unbooked/ registered/referred ??
- Time date & place of admission
- With chief complaints of
- Can give obstetric history- optional

CHIEF COMPLAINTS

- Period of amenorrhea with complaints of –
- Apparently asymptomatic – asked to get admitted on account of
- No history of / negative history

H/O Present Pregnancy

- How she conceived – spontaneous/ took treatment
- Diagnosed pregnancy
- First trimester – first visit to health center
 - h/o fever, emesis, exposure to teratogen
- 2nd trimester – anc visits , treatment taken, T.T. , quickening,etc
- 3rd trimester –
- Comment about investigations done & treatment taken

Obstetric History

- G – Gravida
- P – Parity
- formula G P T- P-A –L
- Describe each pregnancy - antepartum, intrapartum, postpartum with its outcome with emphasis on any complications
- Contraceptive history

Menstrual History

- Age of menarche
- LMP – EDD by Naegele's formula
- Regularity , duration of cycle,



- Past history
- Personal history
- Family history
- Dietary history

GPE

- Patient is lying comfortable, well oriented
- Built & nourishment
- Height, weight, BMI
- Vitals – PR, BP, RR, Temp
- GPE – PROPER
- Systemic – cardio- respiratory system
- Breast examination

P/A Examination

- Pre- requisites – stand on right

ask her to empty bladder

thighs semiflexed with abdomen exposed
ideally up to mid thigh

- Inspection
- Palpation
- Percussion
- Auscultation

Inspection

- Abdomen is distended with gravid uterus – longitudinal, transverse, oblique
- Umbilicus – normal/inverted/everted
- Skin- stria, linea nigra, scar marks, visible veins
- Hernial sites

Palpation

- Correct dextrorotation
- Fundal height – by ulnar border of hand
- Measure SFH and abdominal girth
- 4 grips - fundal grip
 - lateral grip
 - first pelvic grip
 - second pelvic grip

Auscultation

- FHS –Location, rate
- Cephalic – spino-umbilical line
- Breech – around umbilicus
- In occipito-posterior-in flanks
- Transverse lie- above umbilicus