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HISTORY TAKING & EXAMINATION

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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

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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

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CHIEF COMPLAINTS

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

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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

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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

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Menstrual History

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

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

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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

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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

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Inspection

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

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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

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Auscultation

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

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