

PATIENT INTERVIEW GUIDE

*Obtain pertinent demographic information (sometimes you already have this information from the chart)
May not need to ask all of the information listed, especially if it is a quick interview*

Chief Complaint

“What brings you here today?”

History of Present Illness

May not all be necessary, depending on the chief complaint; use judgment – may also need to elaborate beyond these questions

- Where it is located on the body (such as pain)
 - Does it radiate
- Timing
 - When did it start / how long has it been going on?
 - Is this a new problem / first time having this problem?
 - Intermittent or constant?
 - If intermittent, how long does it last, and how often does it occur?
- Quality (particularly important if pain)
 - Dull, sharp/knife-like, achy, pressure, tightness, tingling, etc
- Severity or intensity
- What triggers the symptom
 - What were you doing when it started
 - What causes it to occur
- Alleviating / aggravating factors
 - What helps it
 - What makes it worse
- Any other symptoms that you have?

Past Medical History

*If possible find out how long current illnesses have been going on, and obtain dates for any events
It may not be necessary to ask every question, if not pertinent*

- Childhood illnesses
- Adult illnesses
 - Include any recent illnesses (i.e. infection)
- Surgeries
- Hospitalizations
- Injuries
- Trauma
- Screening tests or exams

Allergies

- Prompt with common allergies, if needed (aspirin, sulfa, penicillin)
- Make sure you include the reaction
- Also ask about seasonal, environmental, contact and food allergies

Current Medications

- Prescribed medications (also determine when started and if any doses have been changed recently)
 - Questions to ask about medications
 - Name of medication
 - Dosage and frequency / change in dosage (make sure you have correct units)
 - The way the patient is actually taking it (don't assume it's the same as written)
 - The reason the patient is taking the drug
 - How long taking it
 - Does the patient feel it is working
 - Has the patient had any issues or side effects from it
 - Compliance / remember or able to take it (can ask how the patient remembers to take it)
 - Remind of typically "forgotten" medications:
 - Samples
 - Birth control pills
 - Creams/ointments
 - Eye/ear medications
 - Inhalers
 - Recent / current antibiotics
 - Clarify any PRN medications for frequency of use
- Over-the-counter medications
 - Herbal / natural products (including household remedies)
 - Vitamins
- Immunization status

Family History

May not always be important to ask this information (use judgment)

- Age/current health status of parents, siblings and grandparents (if applicable)
- *Based on judgment* could ask about similar symptoms or conditions in family

Social History

May not need to ask all of these (use judgment)

- Occupation
- Tobacco/Alcohol
- Illicit drugs
- Caffeine use (if applicable)
- Diet (especially if on a special diet; or should be on one but is not)
- Exposure (if applicable, such as with infections)
- Sexual partners (if applicable)
- Living situation
- Ability to perform activities of daily living (if applicable)
- Recreation
- Safety situations (i.e. abuse; if applicable)

Review of Systems

- *Typically asked as closed-ended questions (yes/no); often will be filled out ahead of the visit*
- *May not need to ask all of these questions, especially if focused interview/examination- use your professional judgment*

- *Generally move from head to toe when asking questions*

If the patient has any of the symptoms, ask questions that are similar to the questions asked in HPI; do not repeat things already answered as part of the HPI (also do not document twice in the SOAPE)

Can start by saying “We are going to ask a lot of questions about common health problems. If you have any of these symptoms, say yes and I will ask you more about it”

- **General** (ask about sleep, appetite, weight changes, fatigue, fever/chills/night sweats, if clothes fit differently lately, etc)
- **Skin** (ask about rashes, hives, lumps, sores, itching, dryness, recent changes in skin/hair/nails, etc)
- **Eyes** (ask about vision issues, recent changes in vision, blurriness, double vision (diplopia), blind spots, last eye exam, ocular pain, photophobia, etc)
- **Ears** (ask about hearing, hearing aid, recent changes in hearing, ringing in ears (tinnitus), dizziness (vertigo), ear pain, drainage, etc)
- **Nose** (ask about stuffiness, runny nose (rhinorrhea), postnasal drip, itching, dryness, bleeding (epistaxis), sinus pain, reduced or enhanced sense of smell, etc)
- **Mouth/throat** (ask about issues with teeth/gums, bleeding gums, frequency of visiting dentist, sores on tongue, mouth or lips, fever blisters/cold sores, canker sores, thrush, tonsillitis, frequent sore throats, hoarseness/voice changes, etc)
- **Chest/pulmonary** (ask about coughing, sputum (including color, quantity), dyspnea, chest pain, coughing up blood (hemoptysis), wheezing, dyspnea on exertion, orthopnea, last CXR, etc)
- **Breast** (ask about lumps, pain/discomfort/tenderness, self-examination, last clinical exam/mammogram, etc)
- **Cardiac** (ask about cyanosis, syncope, chest pain / discomfort, palpitations, edema, last EKG, etc)
- **GI** (ask about abdominal pain, not wanting to eat (anorexia), N/V, diarrhea, constipation, change in bowel habits/appearance, dysphagia, odynophagia, heart burn, regurgitation, vomiting blood (hematemesis), indigestion/bloating, gas, melena, etc)
- **GU** (ask about change in frequency/volume of urine, polyuria, nocturia, pain/burning on urination, flank pain, hematuria, urgency, straining, incontinence, change in color/odor, genital discharge, sores, any other related issues with genitalia, etc)
- **Musculoskeletal** (ask about muscle pain/tenderness, backache, joint pain/swelling, tenderness/heat, etc)
- **Hematology** (ask about easy bruising/bleeding, bleeding gums, blood clots, transfusions, etc)
- **Vascular** (ask about color changes in fingers/toes from cold temperature, leg cramps, edema, loss of hair on extremities, cool extremities, discoloration of extremities, leg ulcers, varicose veins, etc)
- **Neurological / Head** (ask about dizziness, headache, blackouts/fainting (syncope), seizures, weakness, paralysis, numbness/tingling (paresthesia), burning sensations, trembling, pain when moving/walking, ability to walk/steadiness, memory loss, difficulty concentrating, behavioral changes, etc)
- **Endocrine** (ask about thyroid/goiter, recent heat/cold intolerance, excessive sweating, excessive thirst/hunger, polyuria, change in hair distribution/coarseness, breast changes, change in hat/glove/shoe size (i.e. with Paget’s Disease), etc)
- **Psychiatric** (ask about treatment for psychiatric/emotional distress, nervousness/anxiety, mood, personality changes, insomnia, hallucinations/delusions, etc)