13.1 The consultation and history-taking

Name: _____ Class: _____ Date: _____ **Total: 24 marks**

KEY WORDS presenting complaint • red flag

Objective

Structure a history; spot the interrupting pattern.

1 Key knowledge and worked examples

■ The arc

Agenda → complaint in the patient's words → HPC (SOCRATES) → systems review → past/drugs/family/social → ICE ✓. Open before closed; evidence, not conclusions, recorded.

■ Worked example: red flags

Sudden worst-ever headache with vomiting; chest pain with sweating; new focal deficit – severity, speed, associated deficits: the pace changes ✓.

2 Practice

2.1 Name the six SOCRATES elements. [3]

2.2 What does ICE stand for? [3]

2.3 One-line difference between open and closed questions. [3]

3 Exam-style questions

3.1 A fictional role-play consultation: a 46-year-old with burning in the chest for three weeks.

Structure the first five minutes: agenda, an open question that elicits the story, then four closed SOCRATES follow-ups you would actually ask ✓. Justify open-before-closed (the patient's frame arrives unled; the sequence itself carries timing) ✓. State where in the arc you would screen for red flags and what pattern would interrupt ✓. [8]

3.2 A fictional history records only: chest pain, likely angina.

Explain why this is a poor record (conclusion, not evidence: no SOCRATES detail, no context sections) and rewrite two entries properly: one as tight central discomfort on stairs, relieved by two minutes of rest; one as never smoked; forklift driver ✓. List the standard sections a complete record must carry ✓. [7]

Solutions

2.1

- Onset, character, radiation, timing (associated/alleviating), exacerbating-relieving, severity ✓.

2.2

- Ideas, concerns, expectations ✓.

2.3

- Open elicits the story unled; closed harvests specific features ✓.

3.1

- Agenda: introduce, ask what the patient wants addressed ✓.
- Open: tell me about the discomfort from the start ✓.
- Closed: site and radiation; character; relation to food/stairs; severity change over three weeks ✓.
- Open-before-closed: the frame arrives unled; timing patterns are diagnostic ✓.
- Red-flag screen: in the HPC – pain with sweating or at rest at night would interrupt ✓.

3.2

- Poor: it records a conclusion without the evidence or context ✓.
- Rewrites: evidence in the patient's terms plus functional context ✓.
- Standard sections: complaint, HPC, systems review, past, drugs, family, social, ICE summary ✓.

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