

Clinical investigation (CI)

2 курс

KO состоит из: CI components:

- Сбор жалоб
- Анамнез болезни и жизни
- Физикальный осмотр
- Клиническая диагностика и постановка предварительного клинического диагноза

(аналитическая и синтетическая часть работы)

- Complaints
- History of the disease and life
- Physical examination
- Clinical (primary) diagnostic and conclusion (analysis and synthesis)

The purpose of the physical examination is to look for the presence, or absence, of physical signs that confirm or refute the differential diagnoses you have obtained from the history.

The clinical encounter (контакт с пациентом)

(acquaintance, meet)

CE between a patient and doctor lies at the heart of most medical practice.

At its simplest, it is the means by which people who are ill, or believe themselves to be ill, search for the help of a doctor.

(Traditionally the clinical encounter is conducted face to face, although non-face-to-face or remote consultation using the telephone or digital technology is possible and increasingly common)

Showing empathy (демонстрация эмпатии)

- Being empathic is a powerful way to build your relationship with patients.
- Empathy is the ability to identify with and understand patients' experiences, thoughts and feelings.
- Being empathic also involves being able to convey that understanding to the patient by making statements such as 'I can understand what are you feeling and I quite worried about what this might mean.'

Starting consultation (начало общения)

- Introduce yourself and anyone who is with you, shaking hands if appropriate.
- Confirm the patient's name and how they prefer to be addressed.
- If you are a student, inform patients; they are usually eager to help.
- Write down facts that are easily forgotten, such as blood pressure or family tree, but remember that writing notes must not interfere with the consultation.



Basic knowledge about Disease and Symptoms

Disease, illness / болезнь

Manifestation of the diseases:

Symptoms – clinical signs of the disease

sources: complaints, physical examination

- Laboratory findings
- •Instrumental procedures results

Symptoms (примеры/examples)

- Стенокардия angina pectoris ишемическая боль
- Изжога heartburn
- Зуд − rush
- Кровотечение bleeding
- Боль , дискомфорт pain



We have to know the normal human status!

Clinical examination:

- Сбор жалоб и анамнеза болезни и жизни
- Физикальный осмотр
- Клиническая диагностика и постановка предварительного клинического диагноза

(аналитическая и синтетическая часть работы)

- Complaints and history of the disease and life
- Physical examination
- Clinical (primary) diagnostic and conclusion (analysis and synthesis)

The purpose of the physical examination is to look for the presence, or absence, of physical signs that confirm or refute the differential diagnoses you have obtained from the history.

What are you complaining of? На что жалуетесь?

or <u>What is your main problem</u>? / Что Вас беспокоит? 3 rules of complaint collection / 3 правила:

- 1.Passive collection(hearing)
- 2. Active (asking)
- 3.Detail of complaints (ask more about each complaint) Детализация жалоб



Example

Chest pain – passive

Precise location – *active detail* increased by deep breath in and coughing

active detail

Conclusion: pleural pain

Characteristics of the pain, Socrates (характеристики боли)

Site

- Somatic pain, often well localised, e.g. sprained ankle
- Visceral pain, more diffuse, e.g. angina pectoris

Onset

Speed of onset and any associated circumstances

Character

 Described by adjectives, e.g. sharp/dull, burning/tingling, boring/ stabbing, crushing/tugging, preferably using the patient's own description rather than offering suggestions

Radiation

- Through local extension
- Referred by a shared neuronal pathway to a distant unaffected site, e.g. diaphragmatic pain at the shoulder tip via the phrenic nerve (C₃, C₄)

Associated symptoms

- Visual aura accompanying migraine with aura
- Numbness in the leg with back pain suggesting nerve root irritation

- Локализация: соматическая боль четко локализованная, висцеральная боль – разлитая
- Начало скорость развития боли
- Характер резкая/тупая, жгучая, мучительная/колющая, разрывающая/тянущая
- Иррадиация (отдача)
- Ассоциированные (сопутствующие) симптомы

Characteristics of the pain, Socrates

Timing (duration, course, pattern)

- Since onset
- Episodic or continuous:
 - If episodic, duration and frequency of attacks
 - If continuous, any changes in severity

Exacerbating and relieving factors

- Circumstances in which pain is provoked or exacerbated, e.g. eating
- Specific activities or postures, and any avoidance measures that have been taken to prevent onset
- Effects of specific activities or postures, including effects of medication and alternative medical approaches

Severity

- Difficult to assess, as so subjective
- Sometimes helpful to compare with other common pains, e.g. toothache
- Variation by day or night, during the week or month, e.g. relating to the menstrual cycle

- Длительность: однократная, повторяющаяся, постоянная
- Факторы усиления или ослабления:
 приём пищи, положение тела,
 лекарства
- Тяжесть (интенсивность) субьективная характеристика

Зависимость от времени суток, связь с менструальным циклом.

Active complaints questions

System	Question
Cardiovascular	Do you ever have chest pain or tightness? Do you ever wake up during the night feeling short of breath? Have you ever noticed your heart racing or thumping?
Respiratory	Are you ever short of breath? Have you had a cough? If so, do you cough anything up? What colour is your phlegm? Have you ever coughed up blood?
Gastrointestinal	Are you troubled by indigestion or heartburn? Have you noticed any change in your bowel habit recently? Have you ever seen any blood or slime in your stools?

Active complaints questions

Genitourinary	Do you ever have pain or difficulty passing urine? Do you have to get up at night to pass urine? If so, how often? Have you noticed any dribbling at the end of passing urine? Have your periods been quite regular?
Musculoskeletal	Do you have any pain, stiffness or swelling in your joints? Do you have any difficulty walking or dressing?
Endocrine	Do you tend to feel the heat or cold more than you used to? Have you been feeling thirstier or drinking more than usual?
Neurological	Have you ever had any fits, faints or blackouts? Have you noticed any numbness, weakness or clumsiness in your arms or legs?

History taking / Сбор анамнеза

 Disease history is a chronology and sequence of complaints (appearance, dynamics and change of complaints)

Complaints are the main body of the disease history!