

# *Clinical Skills*

## *CNS*



### CNS History Taking



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# Objectives and materials:

**OBJECTIVE:** To take an ideal history related to CNS signs and symptoms.

**MATERIALS:** there will be standardized patient to take the history from her/him

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## Step/Task (dr. Said that even if it's history taking, wash your hands or only say it)

Introduce yourself to the patient

Hello, I'm (Your name), I'm a second year medical student can I have your ID please?

### 1- Personal data

Name, age, gender, nationality, occupation.

Okay, so can you tell me your name and age please?

Where are you from?

What kind of work do you do?

(Don't ask about the gender)

### 2- Chief complaint

Short statement of the problem that brought the PT, better recorded in the patient's own words.

What brought you here?

When did the problem begin?

How did you come here?

### 3- history of presenting illness (Don't say the medical term, but explain it), ( dr. Said it's not necessary to say all the symptoms but saying two or three from each category is enough)

**Symptoms Onset** (acute, subacute, chronic and insidious), **Duration, Course of the condition** (static, progressive, or relapsing and remitting), **Aggravating and Relieving Factors**, and **Associated symptoms**: such as Pain (back, neck, muscular), Headache, Syncope, Vertigo , SEIZURES, Paresthesia or Numbness, Fever, Nausea, Vomiting, Motor Difficulties (weakness, Atrophy, ataxia, bradykinesia and involuntary movements), Visual Disturbance (diplopia<sup>1</sup>, blurring, scotoma<sup>2</sup>), Auditory Disturbance (hearing loss, tinnitus, dizziness) Dysphagia, Speech and Language Symptoms (dysarthria, dysphonia, comprehension problem), Mental Symptoms (memory difficulty, disorientation in the environment, confusion, lethargy, insomnia, forgetfulness anxiety, depression, hallucination, paranoid thoughts, personality change) Autonomic Dysfunction (bowel, bladder, sexual, postural hypotension).

Pain should be rather defined in terms of the following: location, radiation, quality, severity and Aggravating and Relieving Factors.

#### (SOCRATES)

(S=sight): where's the pain?

(O=onset): when did the pain start? Was it sudden or gradual? Is it progressive or regressive?

(C=character): what is the pain like? An ache? Stabbing?

(R=radiation): does the pain radiate anywhere?

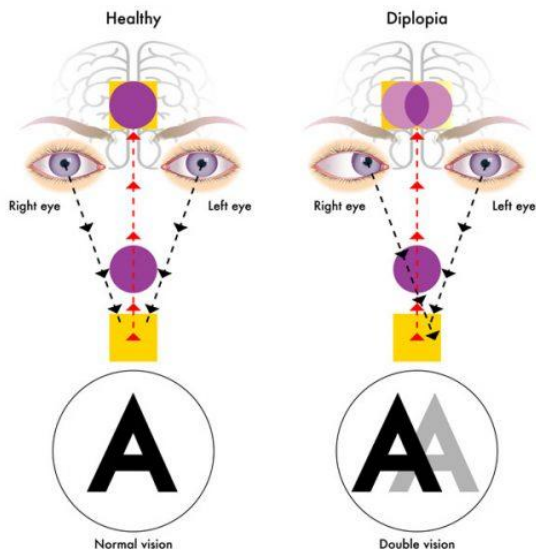
(A=associations): any other signs and symptoms associated with the pain? Like headache, syncope, fever, nausea, vomiting?

(T=time course): does the pain follow any pattern or does the pain increase or decrease at night or morning or it's the same?

(E=exacerbating/relieving factors): does anything change the pain? Like medications or a set position?

(S=severity): how bad is the pain? From 1 to 10 and 10 is the worst?

Diplopia<sup>1</sup>: technical term for double vision.



Scotoma<sup>2</sup>: a partial loss of vision or blind spot in an otherwise normal visual field.

#### 4-Past Medical History

Same situation before, head trauma, tonic exposure.

Chronic disease (DM, HTN, hyperlipidemia, renal or cardiac diseases, connective tissue disease)

History of hospitalization: Admission, Surgery.

Have you had like this pain before? Or head trauma? Or tonic exposure?

Do you have any chronic diseases like diabetes mellitus, hypertension, hyperlipidemia, renal or cardiac disease? Connective tissue disease?

Have you been hospitalized? If yes why? And have you had a surgery before if yes when? And why?

#### 5-Family and Social History

Same situation in the family, chronic disease (DM, HTM), congenital and hereditary diseases, history of stroke or transient ischemic attack.

Marital status, No. of children, housing status, job status and environment/conclude: socioeconomic status. History of travelling.

Habits: Smoking, drinking Alcohol, using prohibited substances. Blood transfusion

Is there anyone in your family that has the same problem as you?

Do you have any chronic diseases in your family like diabetes mellitus, hypertension?

Have anybody in your family experienced stroke or transient ischemic attack?

Are there any congenital and hereditary diseases in the family?

Are you married? if yes how many children do you have?

Are you feeling happy with your family and your work?

Are you feeling good with your socioeconomic status?

Have you traveled recently? If yes where?

Do you smoke? If yes, how many per day?

Have you had a blood transfusion before?

## 6-Drug history

Any recent medication, long term medication, Allergies, Herbal Medication.

Do you take any medication? Or long term medication? Or herbal medication?  
Are you suffering from any allergies?

## 7-Systematic review

CNS, CVS and RES, GIT, UT, MS.

### **CNS:**

Are you suffering from headache?  
Are there any problems with your vision, hearing, smell?  
Do you feel any weakness or numbness while your using your upper or lower limbs?

### **CVS and RES**

Are you suffering from shortness of breath?  
Do you have pain in your chest?  
Do you feel decreasing or increasing in your heart beats?

### **GIT:**

Are you suffering from diarrhea or vomiting?  
Do you have pain in your abdomen?  
Are you suffering from constipation?

### **UT:**

Do you feel pain while urination?  
Have you noticed blood with your urine?  
Do you have kidney diseases?

### **MS:**

Do you rash or dryness in your skin?  
Have you noticed weaknesses in your joints, bones or muscles?  
Do you have fractured bones or joins?

## Ending (extra)

Ask if the patient has any questions, thank the patient

Do you have any questions? Okay we're done thank you

## Videos, pictures and notes:

- Smile, don't stress
- Cut your nails
- Don't forget your stickers
- [Headache history taking video](#)

# Advice: work hard in silence, let success be your noise

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