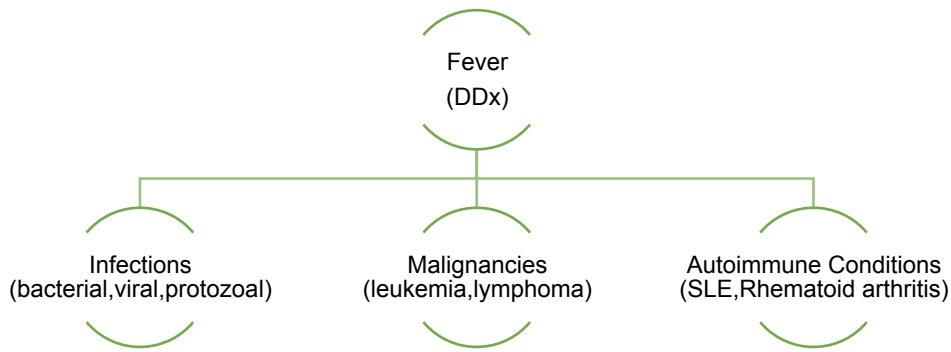


Fever



Done By :

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Let's suppose patient presents to you with **fever** how are you going to take a history ?

~~S~~OCRATE) (no site for fever)



History of presenting illness	1-get started by	-Introduce yourself and ask for permission -Personal info(Name, Age, Occupation, Nationality and Residence, marital status) -Chief Complaint (You already know it's fever but it won't harm you to ask)
	2- onset	-when the fever started? -Sudden or Gradual? -did he measure the degree - where did he measure it in home or hospital -route of measuring - the highest reading
	3-character	-intermittent or continuous?
	4- relieving	-what did u do to decrease the fever
	5-associated symptoms	-Chills or Rigors? Palpitations? -Fatigue and Malaise? Weight loss? -Night Sweating? Loss of Consciousness? Nausea & Vomiting?
	6- time	- at night, in the morning or all ?
	7-severity	-does it affect pt daily life (bedridden-inability to sleep..ect)
SYSTEMIC REVIEW to know the exact cause	CNS	(headache - dizziness - blurred vision - lose of consciousness)
	Respiratory	(chest pain - shortness of breath –wheezing- cough - dry or productive cough - sputum (amount-color-smell-with blood or not)
	GIT	(diarrhea; watery or mucous, abdominal pain, constipation- Dysphagia, Heartburn, GI Bleeding ?)
	GUT	(Pain on micturation, hesitancy, urgency) Bleeding, Discharge, Ulceration, warts, itchiness
	Rheumatology	Skin rash, Joint pain, Muscle pain
PMH	Blood transfusion, operations, recent traumas, TB, DM, Asthma	
Medication History	Substance abuse and other drug history	
Family History	If other family members affected	
Social History	Travel history and Sexual history if STD is suspected, Smoking and Alcohol, Eating outside of house, animal contact, Recent immunization	



Important Notes You Have To Keep In Mind

When you have a case with fever try to divide it to 2 main things:

1-History of fever 2- Causes of fever by doing systemic review and then go through PMH,FH,SH

Whenever you find a positive finding, investigate it more and ask about all other symptoms of the system involved as it is likely will lead you to the diagnosis, **but again you have to go through all the systems.**

Avoid medical terms, e.g.pain with micturition instead of dysuria.

FOR EXAMPLE if the DX was TB you may ask about the manegment ?

You should isolate the patient and do sputum culture to confirm the diagnosis .. the culture takes 3-6 weeks till the result comes ,,

Treatment (isoniazide - rifampicin - streptomycin) for 6 months at least - 1 year and half max .. the best duration of treatment is 9 month to 1 year