

Jaundice

Introduce yourself , take permission

Patient profile (name , age , occupation , marital status)

Chief complaint + duration

Analysis of the Chief Complaint

I. Site

- a) Eyes (Sclera)
- b) Skin

II. Onset (sudden or gradual, progression, first time) OPP

III. Associated symptoms (finish the CC analysis then ask about them ↓)

IV. Exacerbating and relieving factors (Drugs, exercise, fasting, certain foods like fava beans).

V. Time: Intermittent (e.g. Gilbert's syndrome), continuous.

Associated symptoms

I. Prehepatic : Hemolytic Anemia → Fatigue, Dizziness, Pallor, SOB.

II. Hepatic :

a) Hepatitis → Fever, RUQ pain, Nausea & Vomiting

Autoimmune → Arthralgia, vitiligo, skin rashes

b) Cirrhosis → Ascites, Limb swelling, Bleeding tendency , Hematemesis , Anal lump

III. Post hepatic : - Obstructive Jaundice → Itching , Dark urine and pale stool

- **Constitutional (Periampullary tumor):**

- Weight Loss - Anorexia - night sweat - steatorrhea – DM

IV. GI Sx : from above to below.

Risk factors: (always ask about smoking and alcohol)

1-Pre-hepatic: Hx of blood diseases (Thalassemia / G6PD), **Drugs** → **PAINS** (Primiquine , Aspirin , Isoniazid ,Nitrofurantoin, Sulfa drugs)

2- Hepatic: , Hx of hepatitis , Hx of bloodTransfusion, or contact w/ jaundiced patient

3- Post-hepatic: Hx of gallstones, Hx of cholecystitis, **Hx of IBD (Crohn's)**

Past medical and surgical

- Previous surgeries
- Chronic illnesses (DM, HTN, Hyperlipidemia)

Drug Hx: → **PAINS** (Primiquine , Aspirin , Isoniazid ,Nitrofurantoin, Sulfa drugs) , OCPs

Family Hx: Hx of blood diseases (Thalassemia / G6PD) , Hepatitis and liver failure . and any chronic diseases.

Social Hx: Smoking history (# of pack years), alcohol , Drug abuse ,travel history , Sexual history