

# PEDIATRICS HISTORY

<b>Introduce yourself , take permission</b>
<b>Patient profile</b> <b>Name:</b> <b>Age:</b> <b>Historian : "Mother"</b>
<b>Chief complaint + duration + Previous similar episodes</b>
<b>HOPI: Analysis of the Chief Complaint</b>
<b>The history of this illness and related information</b> <b>Always ask about Fever, Activity + sleepiness, Appetite(oral intake), wt change, hx of contact in infection(school,nursery), hypoactive: bacterial infection.</b>
<b>Systemic Review :</b> = General : -Wt change - fever - sweating -activity -sleeping -general condition =Eye :-redness -discharge -diplopia . =Ear:-discharge -pain = Mouth: -ulceration -bleeding from gum = Neck :-swelling -limitation in movement = Skin : - Rash -hyperpigmentation or hypopigmentation -hemangioma mongolian spot = Respiratory : -Nasal discharge - Epistaxis -cough -wheezes -cynosis -rapid breathing -stridor = CVS: -cynosis -rapid breathing -excessive sweating during feeding = GI : -vomiting -diarrhea - abd pain -change of color of stool -abdominal distention -sticky stool - blood in stool -melena =CNS : -abnormal movement -headache -gait -vision -hearing -change of level of consciousness -neck stiffness -diplopia-photophobia = GUS: -dysuria -urgency -enuresis -loin pain -# of wet nappies -scrotal swelling -frequency change amount color = musculoskeletal: -joint swelling -joint pain -limitation in movement -joint stiffness = infectious -fever -chills -rigor
<b>Perinatal History :</b> <b>1-Antenatal 2-natal 3-post-natal</b> <b>Mother age</b> <b>Maternal fever or rash</b> <b>Maternal diabetes</b> <b>Drug taking during pregnancy</b> <b>Exposure to radiation</b> <b>Antenatal car pain, regular visited complications (DM,HTN) ,drugs, infection TORCH (fever+rash in 1st trimester) bleeding</b> <b>History of prolonged rupture of membrane more than 18-24hours</b> <b>Duration of pregnancy in weeks ( full term is equal or more than completed 37 weeks vs premature is less than completed 37 weeks)</b> <b>Mode of delivery ( vaginal vs cesarian section)</b> <b>Cried after birth</b> <b>3</b> <b>Birth weight</b> <b>Neonatal admission (if yes</b> <b>reason for admission</b> <b>duration</b> <b>treatment received</b> <b>Neonatal Jaundice</b>
<b>Nutritional History:</b> wt gain, urine output, stool, sleep, activity after wake up, feel of emptiness in mother

<p>Breast feeding ( frequency, duration ) should take iron + ViED</p> <p>Bottle feeding ( frequency , amount reason for bottle feeding )</p> <p>Weight gain</p> <p>Weaning ( time of adding solid food ) 46 months</p> <p>Table food (type amount )</p>
<p><b><u>Developmental History :see the table</u></b></p> <p>Gross motor</p> <p>Fine motor</p> <p>Language</p> <p>Social</p> <p>School performance</p>
<p><b><u>Vaccination History</u></b></p> <p>Types of vaccinations Age of vaccination when last vaccine, take them on time?? According to JNP or UNRWA complications: rash(cellulitis).</p>
<p><b><u>Past medical and surgical: Hx Chronic diseases , Hx of blood transfusion . Any surgeries or trauma .</u></b></p>
<p><b><u>Drug &amp; Allergy Hx what he is taking , any recent change , adherence to medications</u></b></p>
<p><b><u>Family History :</u></b> ( it is better to draw a family pedigree)</p> <p>Father age, Mother age, Consanguinity , # of children , any similar conditions in the family , Genetics disease , Early deaths in family.</p>
<p><b><u>Social Hx: Address , House (floor #of rooms well ventilated or not ), Occupation of parent , Income, Insurance, History of contact with animals, Smoking in the house</u></b></p>