

Constipation

Introduce yourself , take permission

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

Chief complaint + duration

Analysis of the Chief Complaint

Onset (sudden or gradual, progression, first time) = **OPP**

Frequency: Times per day

Consistency: (Sausage shape, separate hard lumps like nuts)

Blood:

Caliber: large caliber, narrow or pencil thin stools

Amount (small/large)

Mucous

Pain

Melena

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

Associated symptoms

Constitutional:

- Weight Loss
- Anorexia
- fever
- night sweat

GI: From above to down

- a) Mouth ulcers → IBD
- b) Nausea & Vomiting → Intestinal obstruction
- c) Abdominal pain >> Intestinal obstruction, IBD
- d) Abdominal distention → IBS, Intestinal obstruction
- e) Alternating diarrhea → IBS
- f) Anal pain or itching → Hemorrhoid, Perianal fissure

MSS

Skin rash, Joint Pain, Eye Symptoms

Hypothyroidism : Cold intolerance, Weight Gain , fatigue.

DM : Polyuria, Polydipsia, Polyphagia

Hypercalcemia : Renal stones , bone pain , polyuria , abdominal pain.

Dehydration : feeling thirst , dark urine , oliguria

Risk factors

- I. IBD → Family hx
- II. Colon CA → Low fiber diet, family hx
- III. Intestinal obstruction (Adhesions) → Previous surgeries

Review of systems

Past medical and surgical

- Previous attacks
- Previous surgeries → Intestinal obstruction (Adhesions)
- Chronic illness
- (DM, HTN, Hyperlipidemia) , Hx of trauma (spinal cord)

Drug Hx: →Iron and Ca supplement , opioids , thiazides , Antacids

Family Hx: Ask about relevant conditions related (IBD , Colon CA) and any chronic diseases.

Social Hx: Smoking history (# of pack years), alcohol , travel history , Diet and water intake

