

Hx in Pediatrics

Patient profile:

Name Age Residency

Admitted through ER/OPC/Referred from.....

On...../...../2010 At.....:..... the history was taken from

Chief complaint:

H.P.I.:

(Ask about change in activity + family member who have the same condition + first attack)

Systemic Review:

General Hx:

- ❖ Fever (documented? how much?), chills, rigor, sweating (during night?)
- ❖ Wt loss (how did the mother notice), appetite
- ❖ Sleeping, crying more than usual

Respiratory & Cardiovascular Hx:

- ❖ Cough (dry, wet or productive - color of sputum)
- ❖ Difficulty in breathing, cyanosis
- ❖ Wheezes, stridor
- ❖ Nasal discharge, epistaxis,
- ❖ Feeding pause, excessive sweating during feeding

Gastrointestinal Hx:

- ❖ Vomiting (color, amount, frequency)
- ❖ Diarrhea (color, amount, # of nappies), Constipation (consistency, # of nappies)
- ❖ Abdominal pain (cry & stop; not continuous crying)
- ❖ Abdominal distension
- ❖ Melena ,change in the color of stool, blood in stool

UGS:

- ❖ Loin pain
- ❖ # of nappies
- ❖ Dysuria
- ❖ Enuresis
- ❖ Scrotal swelling

CNS Hx:

- ❖ Abnormal movements
- ❖ Photophobia, limitation in movement
- ❖ Loss of consciousness
- ❖ diplopia (double vision)
- ❖ Headache, hearing, vision

MSS & Skin:

- ❖ **Joints** swelling /pain/limitation in movement/stiffness
- ❖ Rash
- ❖ Itching
- ❖ Hyper/hypo pigmentation
- ❖ Hemangioma

Head & face: (any positives ask if bilateral or unilateral)

- ❖ **Eyes:** redness, discharge, diplopia
- ❖ **Ears:** redness, discharge, pain (continuous crying)
- ❖ **Nose:** discharge, epistaxis
- ❖ **Mouth:** Ulcers, gum bleeding
- ❖ **Neck:** swelling, limitation in movement

P.M.H:

- ❖ Previous admissions
- 1. why..... when..... duration.....
- 2. Dx & tx
- ❖ Hx of blood transfusion , Hx of allergy (food or drugs)
- ❖ School absence

Perinatal Hx:

❖ Prenatal Hx:

1. Mother age (at pregnancy)
2. Fever or rash during pregnancy
3. Drugs during pregnancy, exposure to radiation
4. Gestational diabetes or hypertension
5. Infections (TORCH)
6. Antenatal care

❖ Natal Hx:

1. Delivery mode: (C-section or vaginal)
 - If c-section why? (cause related to mother or fetus or it could be just because she had previous cesarean)
2. Full term > **37wks** > premature
3. Crying
4. Birth wt

❖ Postnatal Hx:

1. Admission to NICU why.....duration.....
2. Neonatal jaundice (when did it start ?)

Nutritional Hx:

- ❖ Breast feeding (frequency & duration)
- ❖ Bottle (why? frequency & duration)
- ❖ Weaning & table food

Vaccination Hx:

- ❖ Type of vaccinations
- ❖ Last vaccine the child received
- ❖ Complications

Developmental Hx: see the last page

Family Hx:

1. Father's age diseases smoker
2. Mother's Age diseases smoker
3. Consanguinity (degree)
4. Early deaths or abortions
5. Genetic disease
6. # of brothers & sisters (does anyone have the same condition?)

Social Hx:

- ❖ Father's occupation
- ❖ Mother's occupation
- ❖ Pets what are they?
- ❖ Insurance House (ventilation & rooms)

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