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SIW

Theme: How to take the
Case

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- When he become doctors,we should always remember the following things.As soon as the patient enters the consulting room or when we enter his room,observation should begin immediately. We look for external signs and symtoms as long as the professional visit lasts.
- How do you begin the consulation with the patient? A first requirenment is to develop a feeling of sympathy with the patient by your questions,your actions, your interest in him and his troubles. Select and choose your questions well to be adequate for the situation.



Now when the patient begins to tell you his complaints, his signs and symptoms and various diagnostic terms that have been given to his disease, you should carefully note what he is telling you.

When the patient has finished his description, it is for you to make clear some points he did not give in details. Your questions must be understood by the patient well to get a meaningful answer.



When questioning the patient your aim should be to make the patient feel free, so that he tells you everything. The patient must feel at his ease. Never hurry him, that is the most thing you can do. When you record his symptoms, be sure to have the exact expressions used.



HOW TO TAKE THE CASE AND HOW TO USE OUR REPERTORIES AND MATERIA MEDICAS

- A physician came to me with the following statement:
"Dr., you have given us your methods of proving drugs for the purpose of securing methods of proving drugs for the purpose of securing symptoms and have also given us your method for grouping and ranking them. Will you not give me a grouping and ranking them. Will you not give me a little them tomorrow to tell me how you take the case, and then what books, and how you use the books for selecting the indicated remedy?"



- The next afternoon he had another physician and myself met in the corner of the library and I gave them some of the following; I also promised to put what I gave them into pamphlet or book form, elaborating it by illustrative cases and adding the number of the pages in the books; also the number and name of the journals mentioned during our conference. The following is the result of that promise: Time is the most important essential for taking the case, especially when the patient is a babe. To the statement, made by my boyhood friend and others who think, talk, and act as he did, viz., that memory and life are too short to study and remember all the provings, let me say that time is a relative term, and that an additional hour spent in taking the case and selecting the remedy may be worth years of comfort and even life to the patient.



- One of the first and most essential steps in taking the case of office patients is to so arrange your private room that the light from the windows may fall upon the patient's face and your back. This will enable you to note the general complexion, color of the skin, lips, and mucous membrane. The light, if possible, should not be artificial. My office has two large north windows, double-paned, each of the four panes 3x3 ft. 6 inches. The door through which the patient enters is at the south end. My chair is nearly in the center of the room. The patient's chair is in the southwest corner of the room. By this arrangement I can observe the patient as he or she is ushered in by the office girl and takes his or her seat. This first observation (sight), together with the Entrance Complaint, viz., his or her answer to my question, "What can I do for you?" determines the selection of the remedy in many cases.



[Case 1]

Let us take the following case as an illustration : Fannie J., jolly, good-natured ; light complexion; five feet two inches tall; weighing 140 pounds; pale-faced; colorless lips; cold, clammy hands and feet, came into my office with the following Entrance Complaint: "What can you do to cure my cold and lessen my menstrual flow?" In this case it was not necessary for me to go to any repertory or materia medica to find out that she was a Calcarea carb. patient. Nevertheless I then took my notebook and pencil and secured the following symptoms, family and personal histories, for the purpose of having the record for my files. "Mother living, strong, healthy as were all of her people. Father was a short, chunky, light-complexioned man, whom I resemble. He died when I was three years old of an acute attack of pneumonia. He was always subject to colds and catarrh, as was his mother and her people. His mother died of tuberculosis, as did also one of his sisters. I was slow in learning to walk, not being able to do so until I was eighteen months old. I did not have any teeth until I was thirteen months old, and my first teeth decayed very early. I had what they called 'capillary bronchitis' at eight years of age and came near dying. I matured at 12. Preceding that, however, I had profuse vaginal discharge for several months. The discharge was thick but did not irritate much. The menses have been coming anywhere from eighteen to twenty-four years of age and came near dying. I matured at 12. Preceding that, however, I had profuse vaginal discharge for several months.



[Case 2]

Let us now take a second case to show that one may be far more difficult than another in many particulars. Case II. Miss Carrie B., aged 26; school teacher; five feet seven inches tall; weight 118; brown hair; skin neither dark nor light, came into the office and dropped into the chair with, "Doctor, I have come in to see if you could give me something to prevent my taking cold on the least provocation. I'm so sensitive to cold. My pupil, Fannie J. (Case I), told me you cured her." When asked what was the result of her taking cold, she remarked, "Oh ! everything." The reply was in an irritated, disgusted, discouraged tone of voice. "Sometimes I have a sore throat with sharp, sticking pains at first, then later a sticky mucus, which is hard to get up or down; this mucus is always worse from three to six A.M., when it often wakes me up; sometimes the cold goes to my liver and my side gets sore and I have sticking, stitching pains over the liver; and my abdomen bloats hard and then constipated and light colored. In either case, the stools are painless. And then again the cold may go to my female organs so that the menses are delayed and accompanied by the same pains that I have in my throat and side, or I may flow like a river. I'm in that condition now. After these cold, I'm weak, good for nothing.



LETERATURE:

- Английский язык для медицинских вузов, Маслова А.М, 170л
- www.google.kz

