

OBS & GYNAE

ATROPHIC VAGINITIS

HISTORY X MANAGEMENT

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TOPIC - HISTORY TAKING



MEDIC



PATIENT



MARKER

PLEASE REFER TO YOUR SCRIPTS

PROMPT

A 68-year-old male presents to the urology clinic with a history of recurrent episodes of painless hematuria, urinary frequency, and urgency over the past six months. He also complains of occasional abdominal pain and weight loss.



LET'S DISCUSS

INTRODUCTION AND RAPPORT BUILDING

- Confirm patient's identity and consent
- Assess the onset, duration, and progression of symptoms
- Explore the patient's understanding of their condition

OBTAINS A THOROUGH HISTORY OF THE PATIENT'S PRESENTING SYMPTOMS

- Duration of symptoms
 - Severity of symptoms (mild, moderate, severe)
 - Associated symptoms (e.g., vaginal dryness, dyspareunia, itching, burning sensation, urinary symptoms)
 - Onset of symptoms (sudden or gradual)
 - Menstrual history (postmenopausal, perimenopausal, premenopausal)
 - Use of hormone replacement therapy (HRT)
 - Previous treatments or interventions
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- Impact of symptoms on quality of life and sexual function
 - Any recent changes in sexual partners or practices
 - Use of personal hygiene products or perfumed soaps
 - Relevant medical history, such as diabetes, autoimmune disorders, or cancer treatments
 - Collateral history from partner or close family members

OBTAINS A THOROUGH HISTORY OF THE PATIENT'S PRESENTING SYMPTOMS

- "Can you tell me for how long you've been experiencing these symptoms?"
- "Would you describe your symptoms as mild, moderate, or severe?"
- "Have you noticed any additional symptoms, like vaginal dryness, pain during sex, itching, burning sensations, or urinary issues?"
- "Did these symptoms start suddenly or did they come on gradually?"
- "Could you share your menstrual history with me, particularly if you are postmenopausal, perimenopausal, or premenopausal?"
- "Have you ever used hormone replacement therapy (HRT)?"
- "Have you tried any treatments or interventions before for these symptoms?"

FURTHER EXPLORATION

- "Could you describe the sensation of the vaginal dryness you've been experiencing? How has it been affecting your daily life?"
- "You mentioned experiencing painful intercourse or dyspareunia; can you tell me more about this?"
- "Can we discuss the itching or irritation you've felt around the vaginal area? How severe is it?"
- "Can you provide more details about the burning sensation you've felt during urination? Is it persistent or intermittent?"
- "Can you tell me more about any unusual vaginal discharge you've noticed, including its consistency or any unusual smell?"