



INTRODUCTION TO THE INTERVIEWING PROCESS

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THE PATIENT INTERVIEW AND HISTORY

- Patient interview
 - First step in examination process
 - Establish a **relationship** with the patient
 - Keep in mind the education, culture & religion of patient
 - Treat the patient with Compassion & Care



Do's

- ✓ Do use a sequence of questions that begins open—ended questions.
- ✓ Do leave closed—ended questions for the end.
- ✓ Do select a private location where confidentiality can be maintained
- ✓ Do listen attentively
- ✓ Do ask one question at a time



Do's

- ✓ Do encourage the client to ask questions
- ✓ Do listen with the intention of assessing the client level of understanding of his/her medical issue.
- ✓ Do correlates signs and symptoms with medical history and objective findings to rule out systemic disease



DON'T

- ❖ Don't jump to premature conclusion
- ❖ Don't interrupt or take over the conversation when the client is speaking.
- ❖ Don't destroy helpful open-ended questions
- ❖ Don't use professional or medical terms
- ❖ Don't overreact to information presented.
- ❖ Don't use leading questions.





Leading Questions

Where is your pain?

**Does it hurt when
you first get out
of bed?**

**Does the pain radiate
down your leg?**

**Do you have pain in
your lower back?**

Better Presentation of Same Questions

**Do you have any pain
associated with your
injury?**

If yes, tell me about it.

When does your back hurt?

**Do you have this pain
anywhere else?**

**Point to the exact location of
your pain.**

METHODS OF CHARTING

- SOAP – documentation in a logical manner
 - **Subjective** data – what the patient says
 - **Objective** data – measurable information
 - **Assessment** – diagnosis or impression of problem
 - **Plan** of action – options for treatment, follow-up



THE PATIENT INTERVIEW AND HISTORY

- Patient responsibilities
 - Provide accurate information about past medical conditions
 - Participate in health-care decisions
 - Follow PT's orders for treatment

Telescoping : Clients may forget, underreport, or combine separate health events into a single memory



THE PATIENT INTERVIEW AND HISTORY: *INTERVIEWING SKILLS*

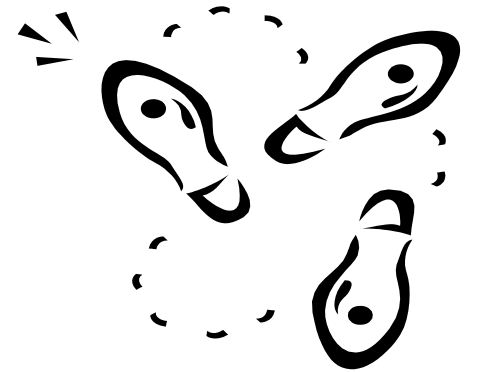
- Practice effective listening
 - Active listener – hear, think about, and respond
- Be aware of nonverbal clues and body language
- Have a broad knowledge base
 - Necessary to ask appropriate questions
- Summarize to form a general picture
 - Verify information



THE PATIENT INTERVIEW AND HISTORY (CONT.)

Eight steps to a successful interview

1. Do research before the interview
 - Review patient records
 - Be sure test and lab results are on the chart
2. Plan the interview
 - Be organized before starting the interview



THE PATIENT INTERVIEW AND HISTORY (CONT.)

3. Make the patient feel at ease
 - Icebreakers
 - Appear relaxed
 - Eye contact

4. Ask the patient for an interview
 - Makes the patient feel more comfortable



8 Steps (cont.)

THE PATIENT INTERVIEW AND HISTORY (CONT.)

5. Ensure privacy / no interruptions
 - Close door

6. Be respectful with sensitive topics
 - Watch for nonverbal clues



8 Steps (cont.)

THE PATIENT INTERVIEW AND HISTORY (CONT.)

7. Do not diagnose or give an opinion
 - Refer questions to physician
 - Do not go beyond your scope of practice

8. Formulate a general picture
 - Summarize key points
 - Ask if patient has questions or needs to add additional information



8 Steps (cont.)



Correct!

APPLY YOUR KNOWLEDGE

1. What type of question is the following: “How you are managing your diabetes?”

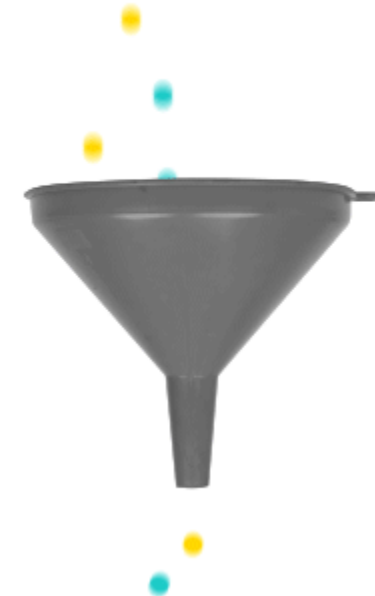
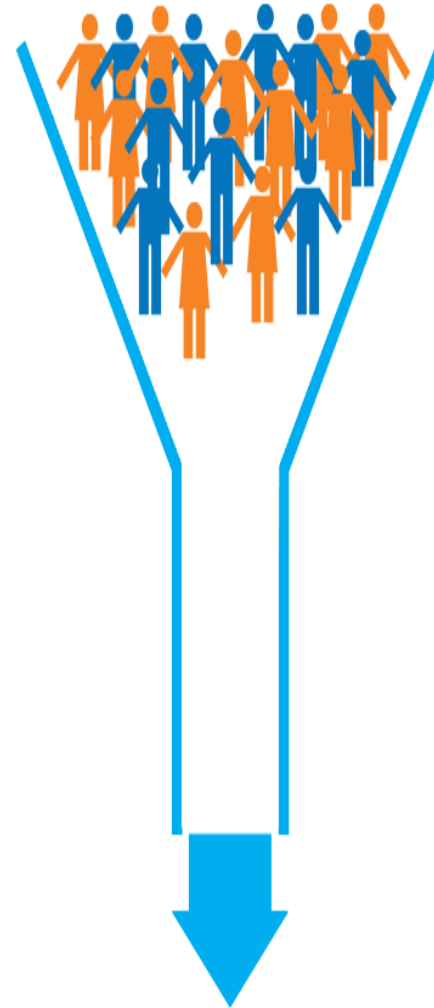
ANSWER: An open-ended question which will allow the patient to explain the situation more clearly.

2. How would you use rephrase technique if the patient made the following statement during an interview? “I just cannot seem to stay on a diet no matter how hard I try.”

ANSWER: For example, you might say, “You are finding it difficult to stay on a diet.”

INTERVIEWING TECHNIQUE

- Open ended question
- Closed ended question
- Funnel sequence or technique
- Paraphrasing technique





Interviewing Techniques

Open-ended questions

1. How does bed rest affect your back pain?
2. Tell me how you cope with stress and what kinds of stressors you encounter on a daily basis.
3. What makes the pain (better) worse?
4. How did you sleep last night?

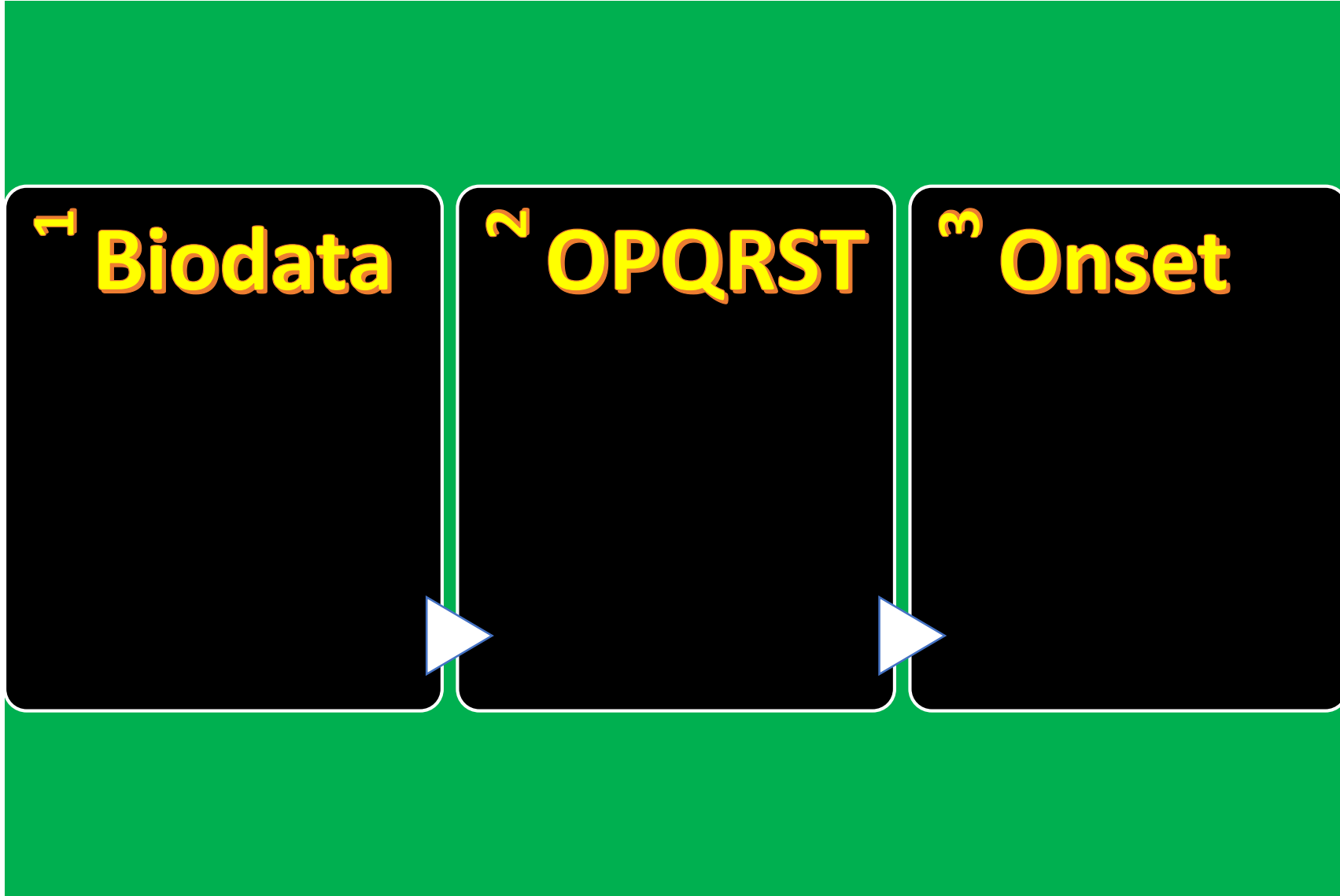
Closed-ended questions

1. Do you have any pain after lying in bed all night?
 2. Are you under any stress?
 3. Is the pain relieved by food?
 4. Did you sleep well last night?
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INTERVIEWING TOOLS

- Outcome measure...documenting the effectiveness of treatment... (using standardized tool)
- Pain scale... VAS
 - Manual Muscle testing
 - Pressure Pain threshold
 - SF36
 - Dash Score
 - NDI

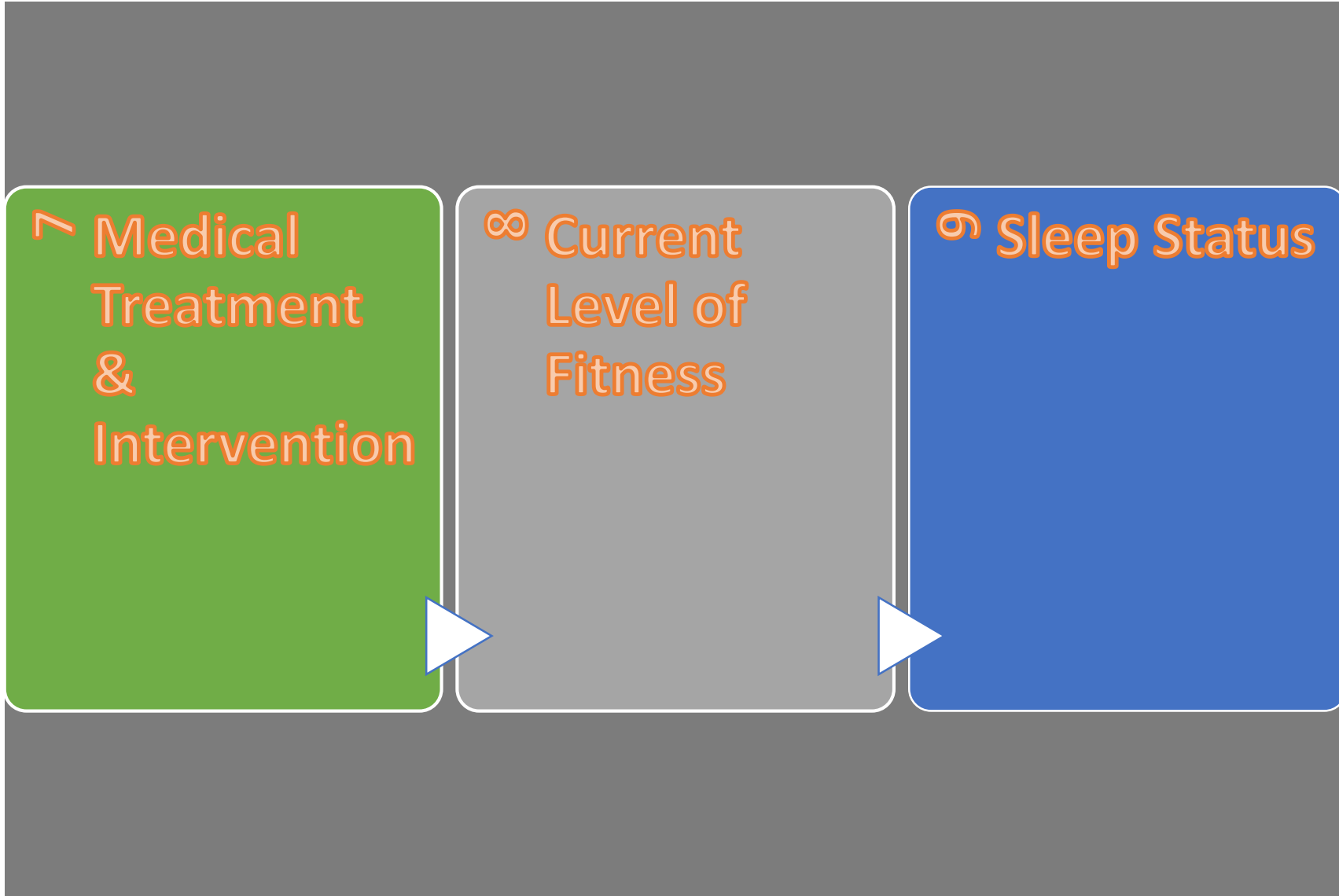


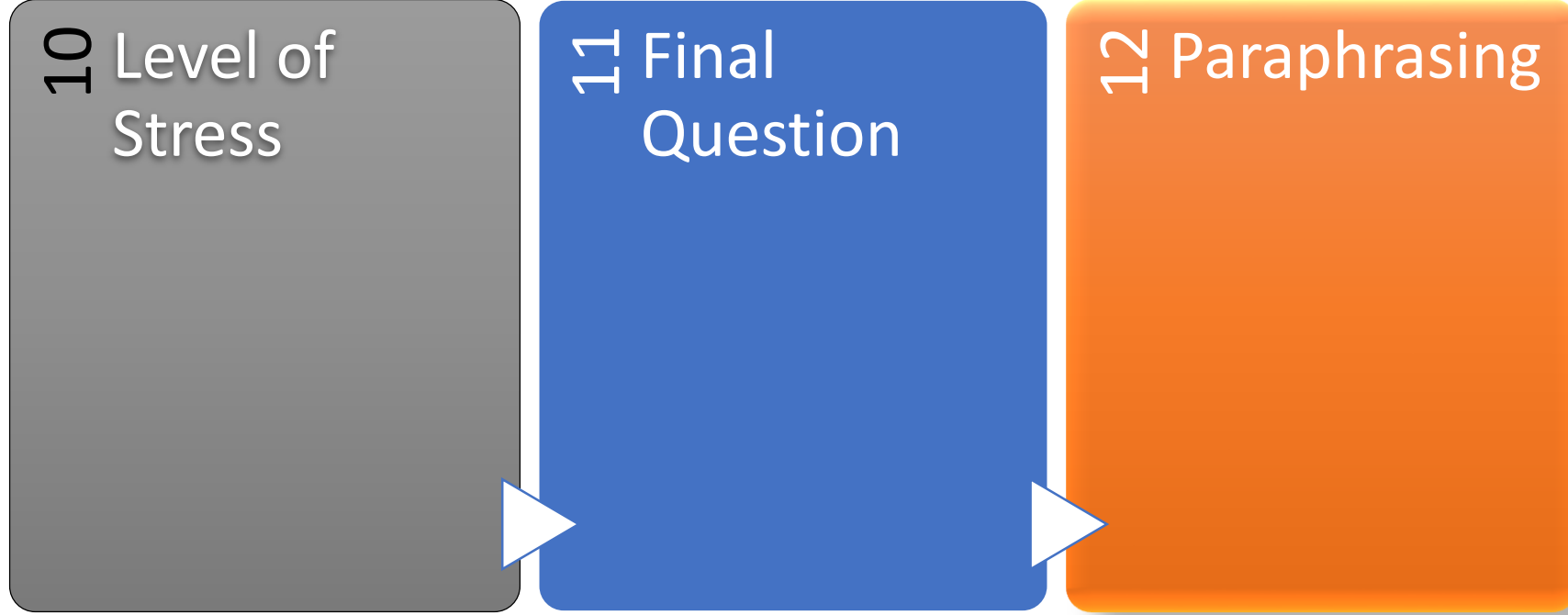


📍 Location

📄 Descriptions
pattern,
Frequency and
intensity of
pain

📋 ASS. Symptoms
Aggre./relieving
factor





RECORDING THE PATIENT'S MEDICAL HISTORY

- Includes pertinent information
 - Patient and patient's family
 - Age, previous illness, surgical history, allergies, medications history, and family medical history
 - Questioning technique – *OPQRST*
 - *Onset*
 - *Provoke*
 - *Quality of pain*
 - *Region where located*
 - *Signs and symptoms*
 - *Timing*



CORE INTERVIEW

Chief Complaint (Onset)

- Tell me why you are here today.
- Tell me about your injury.

Alternate question: What do you think is causing your problem/pain?



FUPs: How did this injury or illness begin?

- Was your injury or illness associated with a fall, trauma, assault, or repetitive activity (e.g., painting, cleaning, gardening, filing papers, driving)?
- Have you been hit, kicked, or pushed?
- When did the present problem arise and did it occur gradually or suddenly?

Systemic disease: Gradual onset without known cause, progressive, cyclical onset: worse, better, worse.

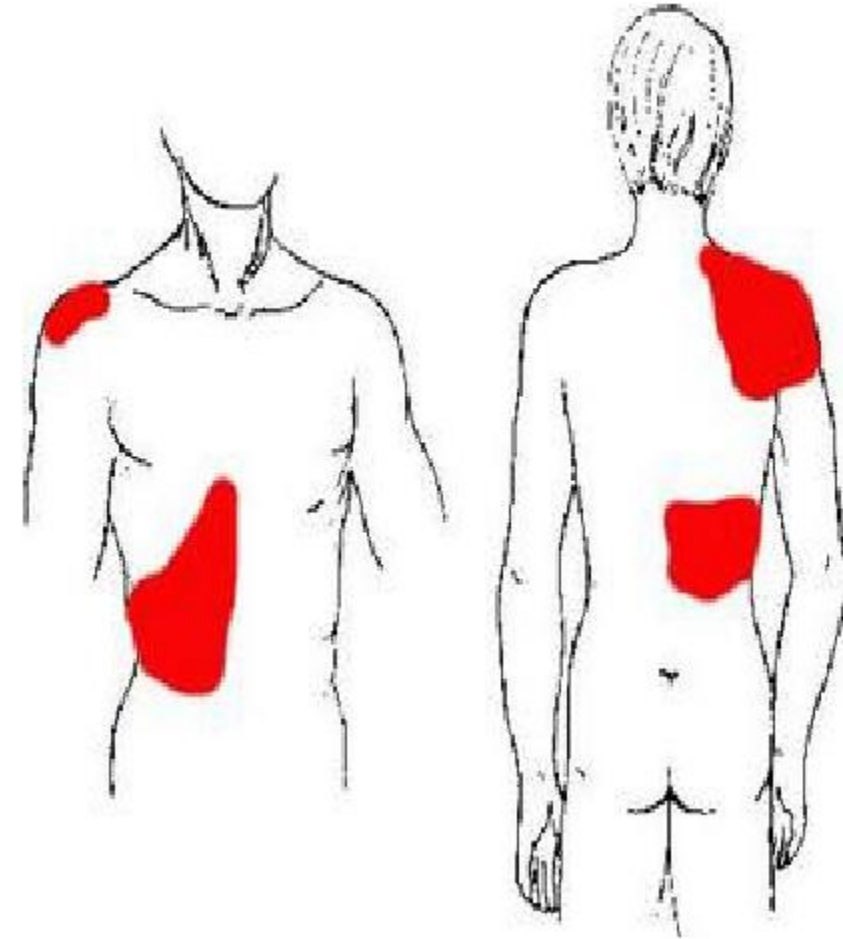
LOCATION

Do you have any pain associated with your injury or illness?
If yes, tell me about it.

- Show me exactly where your pain is located.

FUPs: Do you have this same pain anywhere else?

- Do you have any other pain or symptoms anywhere else?
- If yes, what causes the pain or symptoms to occur in this other area?



DESCRIPTION

- What does it feel like?

Has the pain changed in quality, intensity, frequency, or duration (how long it lasts] since it first began?

Pattern

- Tell me about the pattern of your pain or symptoms,

Alternate question: When does your back/shoulder [name the body part] hurt?

- How does your pain/symptom's change with time?
- Are your symptoms worse in the morning or in the evening?



FREQUENCY

- How often does the pain/symptom's occur?

FUPs: Is your pain constant, or does it come and go intermittently?

Are you having this pain now?

- Did you notice these symptoms this morning?

Duration

- How long does the pain/symptom's last?

Systemic disease: Constant.



INTENSITY

On a scale from 0 to 10, with 0 being no pain and 10 being the worst pain you have experienced with this condition, what level of pain do you have right now?

Alternate question: How strong is your pain?

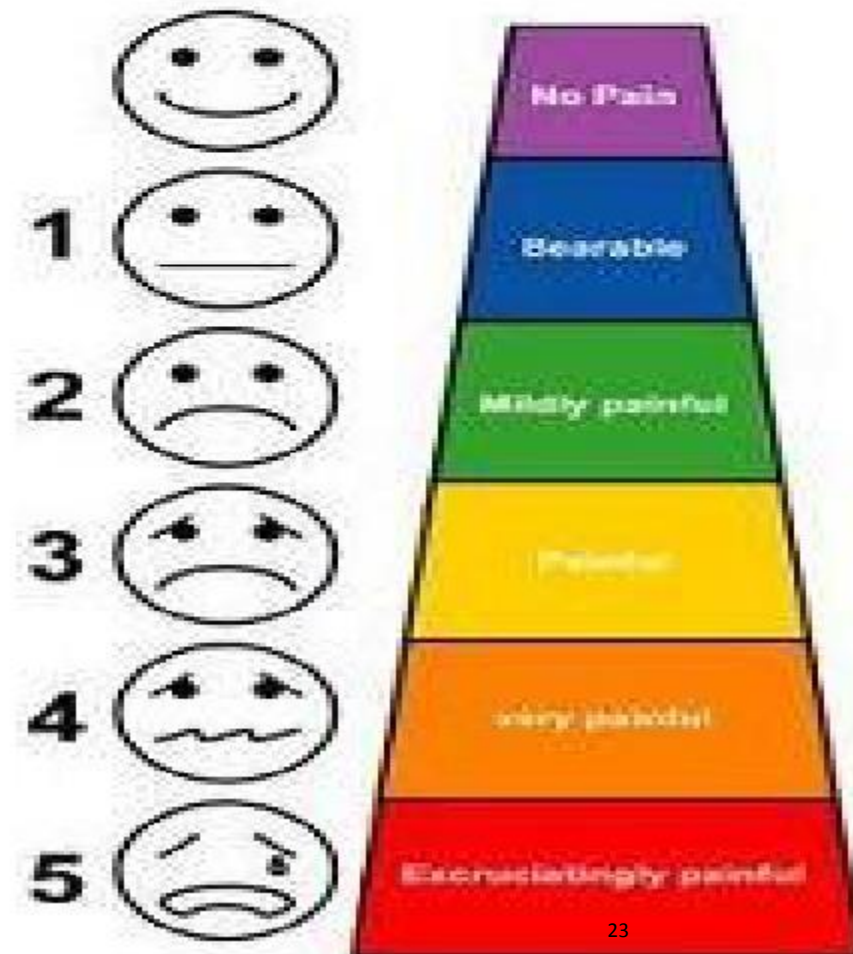
1 = Mild

2 = Moderate

3 • Severe

Systemic disease: Pain tends to be intense.

Pain Intensity Scale



ASSOCIATED SYMPTOMS

- What other symptoms have you had that you can associate with this problem?

FUPs: Have you experienced any of the following?

- Blood in urine, stool, vomit, mucous • Cough • Difficulty swallowing/speaking
- Dizziness, fainting, blackouts • Dribbling or leaking urine • Memory loss
- Fever, chills, sweats [day or night] • Heart palpitations or fluttering • Confusion
- Nausea, vomiting, loss of appetite • Numbness or tingling • Sudden weakness

Systemic disease:

Presence of symptoms bilaterally (e.g., edema, nail bed changes, bilateral weakness, paresthesia, tingling, burning). Determine the frequency, duration, intensity, and pattern of symptoms.



AGGRAVATING & RELIEVING FACTORS

- What kinds of things affect the pain?

FUPs: What makes your pain/symptoms worse (e.g., eating, exercise, rest, specific positions, excitement, stress)?

Relieving Factors

- Who makes it better?

Systemic disease: Unrelieved by change in position or by rest,

- * How does rest affect the pain/symptoms?

**FUPs: Are your symptoms aggravated or relieved by any activities?
If yes, what?**

- How has this problem affected your daily life at work or at home?

0 How has it affected your ability to care for yourself without assistance (e.g. dress, bathe, cook, drive)?





MEDICAL TREATMENT AND MEDICATIONS

- • What medical treatment have you had for this condition?
- **FUPs: Have you been treated by a physical therapist for this condition before? If yes:**
 - • When?
 - 0 Where?
 - ° How long?
 - ° What helped?
 - 0 What didn't help?
 - ° Was there any treatment that made your symptoms worse? If yes, please elaborate



MEDICATION

- • Are you taking any prescription or over-the-counter medications?
- **FUPs: If no, you may have to probe further regarding use of laxatives, aspirin etc. If yes:**
- • What medication do you take?
- ° How often



CURRENT LEVEL OF FITNESS

- What is your present exercise level?

FUPs: What type of exercise or sports do you participate in?

Ask about frequency, duration, intensity

Dyspnea: Do you ever experience any shortness of breath (SOB) during any activities

FUPs: Are you ever short of breath without exercising?

- If yes, how often?
- When does this occur?
- Do you ever wake up at night and feel breathless? If yes, how often?
- When does this occur?



SLEEP-RELATED HISTORY

- Can you get to sleep at night? If no, try to determine whether the reason is due to the sudden decrease in activity and quiet,
- Are you able to lie or sleep on the painful side? If yes, the condition may be considered to be chronic, and treatment would be more vigorous than if no, indicating a more acute condition that requires more conservative treatment.
- Are you ever wakened from a deep sleep by pain?



STRESS

- What major life changes or stresses have you encountered that you would associate with your injury/illness?

Alternate question: What situations in your life are "stressors" for you?

- On a scale from 0 to 10, with 0 being no stress and 10 being the most extreme stress you have ever experienced, in general.

what number rating would you give to your stress at this time in your life?

- » **What number would you assign to your level of stress today?**





FINAL QUESTION

- Do you wish to tell me anything else about your injury, your health, or **your present symptoms that we have not discussed yet?**
- Alternate question: Is there anything else you think is important about your condition that we haven't discussed yet?*





Wisdom is to the soul what health is to the body.

