Chapter 12
Focused History and Physical Examination for Medical Patients

Overview
- Responsive Medical Patients
  - Patient History
  - Rapid Assessment
  - Vital Signs
  - Emergency Care
- Unresponsive Medical Patients

Focused History and Physical Examination: Medical Patients
- Every patient receives a focused history and physical exam
Focused History and Physical Examination: Medical Patients

- Unresponsive medical patients are treated as are unresponsive trauma patients

Focused History and Physical Examination: Medical Patients

- Proceed to the focused history and physical exam after completing the scene size-up and initial assessment

Responsive Medical Patients
Responsive Medical Patients

- Assess the patient’s history
- Assess complaints and signs or symptoms
- Use the techniques of physical exam learned in the Focused History and Physical Examination: Trauma Patients

Responsive Medical Patients

O-P-Q-R-S-T acronym

- Onset
- Provocation
- Quality
- Radiation
- Severity
- Time

- The O-P-Q-R-S-T acronym is useful for remembering what questions should be asked.
- Not all the questions will always have to be asked, nor will they need to be asked in this order.
- O-P-Q-R-S-T is primarily used to evaluate pain but can also be used for other medical conditions.

OPQRST Acronym

- Onset
  - What was the patient doing when the signs/symptoms started?
OPQRST Acronym

- **Provocation/Palliation**
  - What makes the signs and symptoms better or worse?

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OPQRST Acronym

- **Quality**
  - The patient’s description of the symptom

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OPQRST Acronym

- **Radiation**
  - Is there radiation of the symptoms?
OPQRST Acronym

- **Severity**
  - An opportunity for the patient to quantify the pain
  - Typically done with a 1-10 scale
    - The Wong-Baker Scale

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OPQRST Acronym

- **Time**
  - How long have the signs and symptoms been present?

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Responsive Medical Patients

- Remember that a physical exam is required for all patients
- In the responsive patient, assess the body systems associated with the chief complaint
Responsive Medical Patients

D.C.A.P.B.T.L.S acronym
- Deformities
- Contusions
- Abrasions
- Penetrations
- Burns
- Tenderness
- Lacerations
- Swelling

Reminder of injuries and signs of injuries to look for while assessing.

Responsive Medical Patients
- Assess the head, as necessary

Responsive Medical Patients
- Assess the neck, as necessary
Responsive Medical Patients

- Assess for JVD, as necessary

Responsive Medical Patients

- Assess the patient’s chest, as necessary

Responsive Medical Patients

- Assess the breath sounds
Responsive Medical Patients

- Assess the abdomen, as necessary

Responsive Medical Patients

- Assess the four quadrants of the abdomen, as necessary

Responsive Medical Patients

- Assess the pelvis
Responsive Medical Patients

- Assess the lower extremities, as necessary

Responsive Medical Patients

- Assess pulse, motor, and sensation in the lower extremities, as necessary

Responsive Medical Patients

- Assess the upper extremities, as necessary
Responsive Medical Patients
- Log-roll the patient and assess the posterior, as necessary

Patient History

Patient’s History
- Assess SAMPLE History
  - S Signs and Symptoms
  - A Allergies
  - M Medications
  - P Past medical history
  - L Last oral intake
  - E Events leading to injury or illness
Vital Signs

- Assess baseline vital signs
  - Breathing
  - Skin
  - Pupils
  - Blood pressure

Emergency Care for Unresponsive Medical Patients
Unresponsive Medical Patients

- Complete a rapid head-to-toe assessment, as in the *Focused History and Physical Examination: Trauma Patients*

Summary

- Responsive Medical Patients
  - Patient History
  - Rapid Assessment
  - Vital Signs
  - Emergency Care
- Unresponsive Medical Patients