ELSEVIER

Writing a History & Physical

病历书写

（英汉对照）

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Source   （病史来源）
CC   （主诉）
HPI   （现病史）
PMH   （既往史）
Meds   （药物史）
All   （过敏史）
FHx   （家族史）
SHx   （社会活动史）
ROS   （系统回顾）
PE   （体格检查）
Lab/Data（实验室数据和结果）
Summary（小结）
Plan   （诊疗计划）
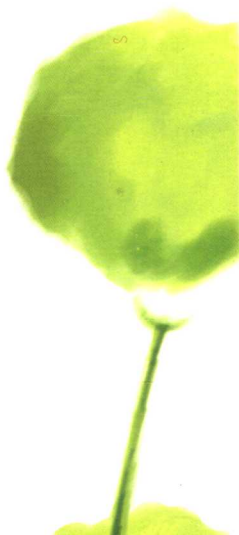
Where there is a will, there is a way.

有志者事竟成。
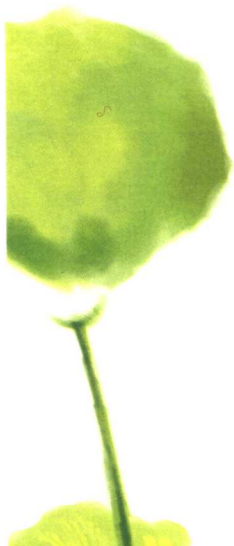
内容提要

本书以简明扼要的语言阐述了临床病历及病程记录的书写规范，内容精炼、实用，中英文对照，书后附有索引，适合广大实习医师、低年资医师、医学院校师生阅读参考。

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前 言

　　学会书写一份合格的病史和体格检查（即病历，history and physical, H&P）是初学者遇到的一大障碍。尽管良好的书面沟通技巧对患者的诊治是至关重要的一部分，但在初学者所接受的训练中，常常未得到重视。而且，初学者经常感到他们的上级医师在病历书写要点及书写次序上各有不同的要求，从而使这一问题更加复杂化。各种不同的病历书写风格和格式常常使初学者感到无所适从。

　　本书适用于接受培训的执业护士或助理医师，用以指导他或她按主要步骤书写完整的、有思路的、高质量的病历。同时，本书不仅解释了病历书写的每一部分的内容，也解释了书写病历过程中每一步骤的目的。因此，不管本书读者服务地域的文化背景如何，他或她都将会明白在出色的医患沟通和诊疗过程中，病历中所需的要素应该放在病历中的哪个部分，以及病历的每一部分必须包括哪些内容。

　　应当记住，学习书写病历是一个过程。这需要时间、临床经验和认真思考，并且要虚心接受批评。最后，不管怎么说，掌握病历书写方法或者说至少能胜任病历书写，对初学者和患者双方都有益处。

Jeffrey L. Greenwald，医学博士

Preface

Learning the process of writing an effective history and physical (H&P) is a major hurdle for trainees. Despite the fact that good written communications skills are clearly a critical part of patient care, they do not always receive the emphasis in training that they require. To complicate this problem, trainees often perceive that their preceptors want differing elements in the write–up and in different orders. There are many variations in style and format to confuse the new trainees.

This guide takes the learner, whether he or she is a medical, nursing, nurse practitioner, or physician assistant trainee, through the major steps of the process of writing a complete, thoughtful, and well–developed H&P. As such, the guide explains the **purpose of each step, not simply the content.** Therefore, no matter what the "local culture" is of the service on which the trainee is working, he or she will understand **why certain elements of the H&P go where they go and what each section of the H&P must accomplish** to permit excellence in communications and patient care.

Remember, learning how to write an H&P is a process. It takes time, experience, careful consideration, and a willingness to seek out critique. In the end, however, the mastery of — or at least competency in — the process will serve the trainee and his or her patients well.

<div align="right">Jeffrey L. Greewald, MD</div>

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The Abridged Guide to Writing a History and Physical

Source

- Very brief
- Identify the source (s) of information
- Comment on the credibility of the source

Chief complaint

- Brief statement of why the patient presented
- Identifies patient and relevant "context" related to presenting complaint
- Focuses attention of reader (s)

History of present illness (HPI)

- Lead the reader toward the conclusions you draw in the Assessment and Plan that follows
- Write in full sentences
- Do not make up abbreviations
- Organize and edit the patient's information
- Give the time course
- Be descriptive, not analytic, regarding all features of the primary complaint (s)
- Include all relevant information about the complaint (s)

病历书写简要指南

病史来源
非常简要
明确病史信息来源
评价病史信息来源的可靠性

主诉
简述患者为何前来就诊
明确患者身份及与当前不适相关的背景

吸引阅读病历者的注意力

现病史（HPI）
引导阅读病历者得出你将在后文病史小结和诊疗计划中引出的结论
用完整的语句书写
不要杜撰缩略语
组织编辑患者信息
列出时间顺序
描述患者原始主诉的各个方面，不要加以分析

包含与主诉相关的所有信息

■ Note other coexisting illnesses/situations that may con—tribute ("context")

■ Guide the reader through the appropriate differential diag—nosis with pertinent positives and negatives

Past Medical History (PMH)

■ Thorough listing of prior medical illnesses or events

■ Include supporting data (e.g., biopsies, PFTs, echos, CTs, if available)

■ Avoid chart lore

■ Consider separating past surgical, obstetric, and psychi—atric histories

Meds

■ List all meds, doses, routes, intervals

■ Include over—the—counter meds

■ Include recently stopped or changed meds

Allergies

■ List all meds to which patient has reacted

■ List the reaction

Family history

■ List or diagram family members

■ List major illness, causes of death for each family member

记录同时存在的其他可能有价值的疾病或情况（"背景资料"）

引导阅读病历者应用相关的阳性症状和阴性症状进行恰当的鉴别诊断

既往史（PMH）

详尽列举既往疾病和事件

包括支持资料（比如可得到的活检资料、肺功能检查、超声、计算机 X 射线断层造影等）

不要使用图表

分述既往手术史、妊娠生育史和精神疾病史

药物史

列出所有药物、剂量、给药途径及用药间隔时间

包括非处方药

包括近期停用或改变用法的药物

过敏史

列出患者所有曾有反应的药物

列出药物反应

家族史

列出或用图表示家族成员

列出每一个家族成员的主要疾病和已故成员的死因

Social history

■ Occupation, hobbies, personal interests

■ Marital status, number of children, social support network, living situation

■ Alcohol, cigarette, and illicit drug use

■ Sexual history

■ May choose to split this into: Social History, Occupational History, and Habits

Review of Systems

■ Comprehensive head–to–toe or system–by–system check-list of symptoms

■ If relevant (positive or negative) to HPI, it belongs in HPI–not here

■ Any significant findings require follow–up in Assessment and Plan sections below

Physical Exam

■ Describe, don't interpret, findings

■ Be systematic, e.g. , General Appearance, Vitals, HEENT, Neck, Lungs, Cardiac, Breast, Abdomen, Rectum, Genitals, Extremities, Skin, Musculoskeletal, Neuro

Labs/Data

■ Common labs first (CBC, chemistries, liver functions, co-agulation profile)

社会史

职业、嗜好、个人兴趣

婚姻状况、子女数目、社会支持网络和生活状况

烟酒嗜好和违禁药物使用情况

性生活史

可以有选择性地将社会史分述为:社会关系史、职业史及个人习惯

系统回顾

从头到脚或一个系统、一个系统地详细列出症状

如果和现病史相关(无论阳性或阴性),应归属于现病史,而不应列在系统回顾中

任何有意义的发现均需在随后的病史小结和诊疗计划中提及

体格检查

描述体格检查所见,不作解释

系统性地进行体格检查,比如:一般情况,生命体征,头眼耳鼻喉、颈、肺、心脏、乳腺、腹部、直肠、生殖器、四肢、皮肤、肌肉骨骼、神经系统

实验室检查 / 数据资料

首先是一般实验室检查(全血细胞计数、化学检查、肝功能、凝血功能)

■ Other blood tests obtained

■ Urinalysis

■ Chest X–ray (and other radiology studies)

■ ECG

■ Other data obtained

Assessment

■ Demonstrate your thinking process

■ Don't summarize; synthesize

■ Include key elements of H&P in a guided fashion to lead the reader through the differential diagnosis and land the reader on your conclusion (s)

■ Generate a problem list (primary and secondary) with explanations considering why and how this situation occurred

■ Write in full sentences

Plan

■ This may be integrated into Assessment section

■ Enumerate a specific problem list as above

■ Be as specific with your plans as possible

■ Address all issues