

PSYCHIATRY HISTORY TAKING

1 PATIENT DETAILS

- Full name, age & occupation
- Discuss confidentiality
- Are you a voluntary or involuntary patient (i.e. under MHA)?

2 HOPC

- What brings you in today?
- Onset & duration of current episode
- Previous similar episodes
- Triggers or precipitating factors (i.e. relationship problems, domestic violence, unemployment)
- Impact on work, family & social relations

3 DIFFERENTIALS

Organic Condition Screen

- Thyroid
 - Heat/cold intolerance
 - Changes in weight & appetite
 - Changes in bowel movement
- Brain/Space-Occupying Lesions
 - Nausea or vomiting
 - Early morning headache
 - Changes in vision
- Substance Use/Abuse
 - Alcohol, recreational drugs

Psychosis

- Do you hear voices no one else hears? *auditory hallucinations*
- Do you think people can hear your thoughts? *thought broadcasting*
- Do you think you are not in control of your actions? *thought insertion*
- Do you think people are stealing your thoughts? *thought withdrawal*
- Do you believe that you are in danger or being harmed? *persecutory delusion*
- Do you believe you are receiving messages from the environment (e.g. TV)? *referential delusion*

Mania

- Do you feel happier than usual? *elated mood*
- Have you required less sleep than usual? *increased level of activity*
- Do you believe you have special powers? *grandiose delusion*
- Have you been engaging in activities you would not otherwise (i.e. spending more money than usual, risky sexual activities)? *impulsivity*

Depression

- Have you been feeling low in mood?
- Have you been feeling low in energy?
- Have you been experiencing poor concentration?
- Enquire about changes in appetite.
- Enquire about changes in sleep pattern.

Anxiety

- Are you feeling anxious or worried?
- Do you actively avoid certain situations (i.e. public speaking)?
- Do you experience physical symptoms during your episode of anxiety (i.e. sweating, trembling, chest pain, dizziness, choking)?

ORGANIC DISORDERS

PSYCHOTIC DISORDERS

MOOD DISORDERS

ANXIETY DISORDERS

PERSONALITY/BEHAVIOURAL DISORDERS

PSYCHIATRY HISTORY TAKING

4 PSYCHIATRIC HX

- Past & current psychiatric diagnoses
- Past and current medications
- Any allergies?
- Compliance to medication & appointments?
- Previous hospital admissions?

5 MEDICAL HX

- Past & current medical diagnoses
- Past and current medications
- Any allergies?
- Compliance to medication & appointments?
- Hospital admissions?

6 FAMILY HX

- Family history of psychiatric and medical conditions (include grandparents, parents, siblings & children)

7 SOCIAL HX

- Employment status
- Financial well-being
- Living situation
- Activities and hobbies
- Social support (i.e. family, friends, GP, psychiatrist, social worker)
- HEEADSSS assessment (for adolescents)

8 FORENSIC HX

- Any ongoing cases with law enforcement?
- Any past convictions?

9 DEVELOPMENTAL HX

- Describe your upbringing
- Relationship with parents in childhood
- Difficulties at school
- Relationships with others (i.e. friends, family)

10 PREMORBID PERSONALITY

- What was your personality like before your current episode?

11 NEXT STEPS

- Conduct a risk assessment
- Perform a mental state examination
- Determine need for admission
- Determine if patient needs to be admitted under the Mental Health Act (MHA)
- Take a collateral history from family/friend