

Investigation 2: Medical Diagnostic Process

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Investigation

2.0: The Medical Diagnostic Process

Introduction

You have probably discovered how much fun you can have discovering a new word that almost no one else has ever heard before. You can work it into conversation and then explain it to your awed friends, when they look at you dumbfounded. For example, you might say, “I caught my dog this morning practicing **zoopharmacognosy**.”

“Doing what?” your friends will ask. “Is that something disgusting?”

“No,” you will answer, “Zoopharmacognosy simply means those things animals other than humans do to medicate themselves when they have an injury or illness. Did you think only humans have medicines? No, animals know to use plants, insects, even soils to treat their symptoms. My dog was eating grass this morning, and that seems to cause her to vomit to cure a stomachache. She probably ate something rancid she should not have gone anywhere near. My dog is cute, but not real smart.”

We will leave a full review of the fascinating medical practices of the animal kingdom for you to research, because the mission of this section lies solely in providing you a sense of the medical diagnostic process used by humans. Humans most likely got started thousands of years ago in much the same way their non-human ancestors did. They felt badly and by chance found that a certain food or activity allowed them to feel better. Likely they shared those experiences with others, by example or by words, and we feel very confident that medical practice grew from that humble beginning.

As knowledge of medications and treatments grew, specific individuals made the effort to learn all they could about what worked and what did not in order to help others recover from all manner of sickness and injury. Eventually schools came about to teach these skills, and our current concept of doctors, nurses, and medical technicians came into existence.

In the sections that follow we will set forth steps one can take to define the nature of an individual’s illness or trauma, identify its cause, seek a treatment, and even document the progress of this process to restore normal, good health. We usually start the process by asking how the patient feels. Feelings, things we cannot see or directly measure, we call **subjective**. We will next collect things (findings or information) that we can measure, touch, and observe, things we call **objective**. Both forms of information have importance.

Experienced physicians can often make a correct diagnosis of a condition simply from talking to the patient over the telephone (using only subjective information). An examination of the patient can add additional clues, but often the appreciation of subtle

clues from an examination require the examiner to have unusual skills of observation based on training and experience. (Medical students commonly hear tales of ancient physicians from the Orient who could diagnose diseases of the liver by feeling the patient's pulse. If those stories were ever true, that ability was lost to medical science long ago.")

It makes good sense that one needs a correct **diagnosis** to effectively treat the patient. In this workbook we will stress the importance of getting the correct diagnosis and introduce you to the ways physicians go about getting to that diagnosis. As you work through the lessons you may notice a few instances where we deviate from that path. Physicians sometimes elect to postpone seeking a diagnosis to see how the symptoms evolve. In some instances physicians start a treatment to see if the response to the treatment will identify the correct diagnosis. We may even see an instance in which a physician guesses a diagnosis and starts treating it because the patient's condition seems too **critical** to even devote time to a thorough physical examination.

We should think of the collection of information from every available source leading to a diagnosis that we have tested for correctness as constituting the **scientific method** in medicine. In addition to this scientific method, we commonly think of medicine as including **art**. What do we mean by the art of medicine? Some would say that the ability of an experienced physician to diagnosis a kidney stone from the way a patient walks into the office constitutes an art. Others might say that the ability to look past an obvious diagnosis and see something more devious or rare as the root cause of a patient's symptoms, we should call an art. All would agree that a physician's ability to sincerely value his or her fellow human being, deeply and personally, in their time of need represents the greatest art in medicine.

Welcome to this introductory presentation of the science and art of medicine.