

Competency		Patient Care					
Sub Domain		History Taking					
Learning Objective		Performs complete or focused histories tailored to individual patient presentations and clinical settings, including patient's cultural background and communication skills					
Milestones							
Year I		Year II		Year III		Year IV	
Mid	End	Mid	End	Mid	End	Mid	End
<ul style="list-style-type: none"> • Describes the role of history taking in the Doctor-Patient encounter • Describes the influence of culture on the patient illness experience 	<ul style="list-style-type: none"> • Obtains a comprehensive history from a standardized patient with minimal complexity, or in supervised encounter with a real patient, while developing appropriate patient rapport • Explains basic vocabulary related to history taking * 	<ul style="list-style-type: none"> • Explains how pathophysiology and patient factors are used in history taking • Gives examples of how culture shapes communication style 	<ul style="list-style-type: none"> • Utilizes a differential diagnosis and understanding of pathophysiology in taking a patient history • Obtains a thorough history while developing appropriate patient rapport which is tailored to the presenting problems, including at least one complicating factor ** 	<ul style="list-style-type: none"> • Explains system factors that can constrain or facilitate history taking † • Conducts a time-limited history based on the differential diagnosis while maintaining patient rapport and without premature closure 	<ul style="list-style-type: none"> • Obtains a problem focused, organized history that is appropriate to the practice setting • Utilizes varying interview techniques to improve rapport and establish therapeutic relationships with patient^{††} 	<ul style="list-style-type: none"> • Uses techniques to obtain a history under more challenging circumstances **, † 	<ul style="list-style-type: none"> • Obtains a patient-centered, problem focused, organized, and culturally sensitive history that is appropriate to the practice setting

APPENDIX:

* **Basic history-taking vocabulary examples:** sign, symptom, objective, subjective, PQRST, open- or close-ended, pedigree, empathy, active listening, reflective statements.

***Examples of Complicating Factors in History Taking:*

- Medical barriers (patient with physical or psychiatric disabilities, poor recall, dementia)
- Communication barriers (using interpreters, proxy informants, or difficult communicators)
- Cultural differences (in communication or with the illness experience)
- Low health literacy
- Professionalism challenges (boundary issues, inappropriate behavior)
- Medically emergent situations

†*Examples of System Factors that Facilitate/Complicate History Taking:*

- Electronic Health Records
- Time constraints
- Competing demands on attention
- Privacy issues

††**Therapeutic Relationship:** Communicating with the patient using empathic and supportive interviewing techniques