



TAKING A CASE HISTORY

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THINK

A person comes to you and says she can't see properly. What questions can you ask to find out what is wrong?

WHAT YOU WILL LEARN

When you'll have worked through this unit you should be able to:

- State what taking a case history is and why it is important
- Describe the things you need to ask about a person's eyes and their vision
- Describe the things you need to ask about a person's general health and lifestyle
- Perform a case history
- Use good communication skills when taking a case history.

FINDING OUT IF THERE IS A PROBLEM

If we want to find out if the person has an eye or vision problem, we need to make sure that we do three things:

1. Ask the person about their eyes and how well they see (symptoms)




2. Measure how well the person can see (visual acuity)



Look carefully at their eyes (signs).





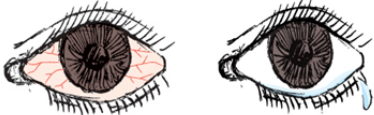

CASE HISTORY

WHAT IS A CASE HISTORY?	<ul style="list-style-type: none"> • A person comes to see you with a problem about their eyes or their health • You will need to ask questions to find out what the problem is • The questions you ask may be about their eyes, their general health and their lifestyle • These questions and the answers the person provides you with make up the case history.
WHEN DO YOU TAKE A CASE HISTORY?	<ul style="list-style-type: none"> • A case history is usually taken at the start of the eye examination • It can continue throughout the examination, especially if your testing reveals new information that you may need to ask more questions about • The only time when we do not start a consultation with the case history is when there is an eye emergency (such as a chemical burn of the cornea).
WHY DO WE TAKE A CASE HISTORY?	<ul style="list-style-type: none"> • The case history is important because it helps you to find out: <ul style="list-style-type: none"> ○ the problem the person is presenting with ○ if the eye problem is getting better or worse ○ which tests need to be performed ○ what action needs to be taken. • You may need to: <ul style="list-style-type: none"> ○ treat the eye problem ○ refer the person to an eye care professional or a medical practitioner ○ talk to the person and/or their community about the spread of the eye disease and provide education on eye care.
	<ul style="list-style-type: none"> • Often, a good case history can give the practitioner a good idea as to what the person's eye problem is even before performing any tests!

TAKING A CASE HISTORY

CHIEF COMPLAINT	<ul style="list-style-type: none"> • The chief complaint (CC) is the main reason the person comes to you; it tells us the main problem the person is having • You must always investigate the chief complaint during the eye examination, and discuss your findings at the end of the examination • We should always try to do something about the chief complaint • For example, a woman's chief complaint might be that she cannot see close up to do her sewing; so we should try to provide her with spectacles that will give her good near vision.
OTHER SYMPTOMS	<ul style="list-style-type: none"> • Other symptoms refer to any ocular or health problems, other than the chief complaint, that the person tells you about.
ASKING FOR DETAILS	<ul style="list-style-type: none"> • Once you know what the person's main concern is (the chief complaint), you will need to ask them more details about the problem • Depending on the person's problem you may need to ask some of these questions. <ul style="list-style-type: none"> – When did the problem first start? – Did it happen gradually or suddenly? – Is it getting better or worse? – Is it there all of the time or only sometimes? – How long has it been happening for? – Is it with one eye or both eyes? – How do your eyes feel? (irritated, itchy, sore) – Do you have pain? <ul style="list-style-type: none"> → If so, what is it like? (dull, sharp) → Where is the pain? → Do you have any other symptoms when you get the pain? – Has your vision changed? – Have you noticed if your eyes look different? (red, swollen) – Have you done anything about the problem, seen anyone else or tried any treatment? – Does anyone else you know have the same problem? – Is there anything more you can tell me about this problem?

EYE HEALTH



VISION		<ul style="list-style-type: none"> To find out how well a person sees, you should ask: <ul style="list-style-type: none"> How is your vision when you look far away? How is your vision when you read books or look at things up close?
FLASHES AND FLOATERS		<ul style="list-style-type: none"> Some people have flashes and floaters in their vision. This could be serious if caused by an injury to the eye Questions you might ask include: <ul style="list-style-type: none"> Do you ever see floating spots or flashing lights in your vision? When did you first notice the spots or the flashing lights? Have the floaters changed in size? Are you seeing more floaters than you did the first time you saw them? Did you have an injury to your eye or your face when you first noticed these flashes or floaters?
EYE HEALTH		<ul style="list-style-type: none"> Do you have red, sore, itchy eyes? Do you get headaches?
VISUAL NEEDS		<ul style="list-style-type: none"> To find out what the person's visual needs are and if they use their eyes for special vision-related tasks, you should ask the person about: <ul style="list-style-type: none"> The work they do (e.g. computer use, drawing, driving) Their hobbies (e.g. art, sewing, reading, fishing) Any sports they play.



FLASHES AND FLOATERS MAY BE SERIOUS AND AN EYE EMERGENCY:

- Some people have floaters for many years – these are usually not serious.
- New floaters and flashes, or floaters that have changed in size could be more serious
- Flashes and floaters may be caused by damage to the retina, especially if the person has a history of trauma to the eye
- If you are not sure about the cause of flashes or floaters, it is best to refer the person to an ophthalmologist immediately.

LENSES

LAST EYE TEST	<ul style="list-style-type: none"> • Have you ever had an eye examination or eye test? • If yes, how long has it been since your last eye test?
SPECTACLES	<div data-bbox="512 409 948 741" data-label="Image">  </div> <ul style="list-style-type: none"> • It is helpful to know if someone currently has spectacles, or if they have had spectacles in the past. • Questions you might ask include: <ul style="list-style-type: none"> – Do you have spectacles, or have you ever worn spectacles before? <ul style="list-style-type: none"> → If the person has had spectacles: → What tasks do you wear your spectacles for? → How old are the spectacles? → How well do you see with the spectacles? → Are you happy with your spectacles? • If not, what is the problem?
HEADACHES	<ul style="list-style-type: none"> ▪ Headaches can be related to eye problems ▪ Questions you might ask include. <ul style="list-style-type: none"> – Do you get headaches or eyestrain? – When do the headaches or eyestrain start? – How long does it last? – Show me where on your head the pain is – Are the headaches worse in the morning or in the afternoon? – Does the headache go away after you've had a sleep? – How bad is the headache? (use a scale, e.g. 1-10, 10 being unbearable pain) – Do you have any other symptoms with the headache (such as vomiting, or seeing flashes of light)
EYE HISTORY	<div data-bbox="504 1426 956 1785" data-label="Image">  </div> <ul style="list-style-type: none"> ▪ Do you have, or have you ever had any eye conditions or diseases like cataract, trachoma or glaucoma? <ul style="list-style-type: none"> – If yes, please tell me more about this ▪ Have you ever had any eye injuries or infections? <ul style="list-style-type: none"> – If yes, please tell me more about this – When and how did this happen? ▪ Have you ever had any surgery on your eyes? <ul style="list-style-type: none"> – If yes, please tell me more about this ▪ Have you ever used any eye drops or medication for your eyes? <ul style="list-style-type: none"> – If yes, please tell me more about this.

GENERAL HEALTH AND MEDICAL AND FAMILY HISTORY

GENERAL HEALTH AND MEDICAL HISTORY



- Many eye problems develop due to previous eye injuries or eye treatment (including surgery) as well as diseases in other parts of the body.
- It is important to ask about the general health of the person before starting the physical eye examination because this can help us find out what is wrong with their eyes. It can also help us plan their treatment.
- Questions you may ask include:
 - How is your general health?
 - Are you seeing a doctor for anything at the moment?
 - Are you using any medications at the moment? (name, dosage, use)
 - Do you have any allergies? (sulphur, antibiotics)
 - Do you have high blood pressure, diabetes or abnormal blood sugar?
 - Are you pregnant?

FAMILY HISTORY



- Some eye problems can be passed on to family members, or are more common in some families than others
- Knowing about eye problems in a person's family can help us identify people who have a higher chance of developing certain problems
- You should ask if anyone in the family has:
 - health problems like diabetes or high blood pressure?
 - eye problems like cataract, glaucoma, retinal detachment or blindness from any other condition?
- You need to record the eye conditions in the person's family, as well as who has or had those conditions (e.g. the person's father had glaucoma).



DIABETES, HIGH BLOOD PRESSURE AND OTHER HEREDITARY PROBLEMS:

- Anyone with a family history of diabetes or high blood pressure should have a general health check regularly
- People often don't have symptoms of these health problems in the early stages, even though the problem might be damaging their body
- It is important for a doctor to detect these problems early so that treatment can begin as soon as possible and damage to the body minimised.

COMMUNICATION SKILLS

EXAMPLES OF GOOD COMMUNICATION SKILLS



Greet the person and introduce yourself in a friendly way.



Show the person where to sit and **sit facing them**.

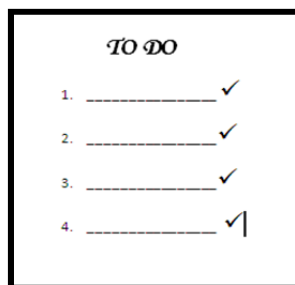


Listen carefully to what the person tells you. This will also show the person that you are taking their concerns seriously.

Use words the person understands. Repeat questions using different words if they do not understand.

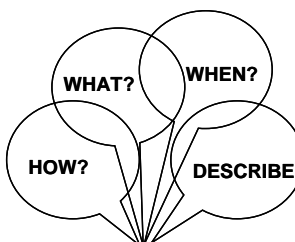


Give them enough **time to answer** your questions. They might need time to think about a question you ask.



Ask questions in an **organised and logical way**.

Ask more questions when the person is not sure about their answer. This will help them give a clearer answer.



Use open-ended questions when possible.

Be sensitive to the person's concerns.

They might be embarrassed or uncomfortable about what they are telling you.

Try to make sure they have privacy when talking to you.

OPEN ENDED QUESTIONS

- Open-ended questions are more likely to elicit more information from the person than closed questions
- Open questions, usually being with: “what...”, “how...”, “why...”, or “describe...”
- Some examples of open-ended questions are:
 - “Why do you want your eyes checked today?”
 - “How did you hurt your eye?”
 - “Describe your headaches?”
 - “What work do you do?”



- ***Open-ended questions require the person to think about the question, and describe what they think or how they feel.***

TEST YOURSELF QUESTIONS

1. When do you normally take a case history during a normal eye examination?

2. Describe some good communication skills you can use when taking a case history.

3. Give examples of some open-ended questions you might ask when taking a case history:

4. What is meant by “the chief complaint” and why is it important to know what this is?

5. A person tells you that they see flashes and floaters. What questions should you ask, and why is it important to find out more information about this?
