

МИНИСТЕРСТВО ЗДРАВООХРАНЕНИЯ РЕСПУБЛИКИ БЕЛАРУСЬ  
БЕЛОРУССКИЙ ГОСУДАРСТВЕННЫЙ МЕДИЦИНСКИЙ УНИВЕРСИТЕТ  
КАФЕДРА ДЕТСКИХ ИНФЕКЦИОННЫХ БОЛЕЗНЕЙ

**А. А. АСТАПОВ, Р. Н. МАНКЕВИЧ, И. Н. ЛАСТОВКА**

**ПРИМЕРНЫЙ ПЛАН ОБСЛЕДОВАНИЯ ПАЦИЕНТА  
И НАПИСАНИЯ МЕДИЦИНСКОЙ КАРТЫ  
СТАЦИОНАРНОГО ПАЦИЕНТА  
ПО ДЕТСКИМ ИНФЕКЦИОННЫМ БОЛЕЗНЯМ**

**THE MODEL PLAN OF EXAMINATION  
OF THE PATIENT AND WRITING  
OF THE MEDICAL HISTORY  
OF THE STATIONARY PATIENT  
ON PEDIATRIC INFECTIOUS DISEASES**

Учебно-методическое пособие



Минск БГМУ 2015

УДК 616.9-053.2-07 (091) (811.111)-054.6 (075.8)  
ББК 57.33 (81.2 Англ-923)  
А90

Рекомендовано Научно-методическим советом университета в качестве учебно-методического пособия 22.04.2015 г., протокол № 8

Рецензенты: д-р мед. наук, проф., зав. каф. инфекционных болезней И. А. Карпов; канд. мед. наук, доц. 1-й каф. детских болезней И. А. Козыро

**Астапов, А. А.**

А90 Примерный план обследования пациента и написания медицинской карты стационарного пациента по детским инфекционным болезням = The Model Plan of Examination of the Patient and Writing of the Medical History of the Stationary Patient on Pediatric Infectious Diseases : учеб.-метод. пособие / А. А. Астапов, Р. Н. Манкевич, И. Н. Ластовка. – Минск : БГМУ, 2015. – 15 с.

ISBN 978-985-567-224-2.

Отражены современные требования к ведению и оформлению медицинской документации в стационарных условиях, а также приведен примерный план обследования пациента с инфекционными заболеваниями.

Предназначено для студентов 4-го курса лечебного факультета, обучающихся на английском языке.

УДК 616.9-053.2-07 (091) (811.111)-054.6 (075.8)  
ББК 57.33 (81.2 Англ-923)

ISBN 978-985-567-224-2

© Астапов А. А., Манкевич Р. Н., Ластовка И. Н., 2015  
© УО «Белорусский государственный медицинский университет», 2015

## DESING OF THE TITLE PAGE

MINISTRY OF HEALTH OF THE REPUBLIC OF BELARUS

BELARUSIAN STATE MEDICAL UNIVERSITY

PEDIATRIC INFECTIOUS DISEASES DEPARTMENT

Head of the Pediatric Infectious Diseases  
Department

---

**MEDICAL HISTORY OF THE STATIONARY PATIENT №** \_\_\_\_\_

First name, last name of the patient \_\_\_\_\_

The clinical diagnosis (deciphered with the indication of a method of confirmation of the diagnosis and weight of a course of disease) \_\_\_\_\_

---

Curator \_\_\_\_\_  
First name, last name of the student

Course, group, faculty \_\_\_\_\_

Term of the cure:

Start date) \_\_\_\_\_

Termination of the cure (date) \_\_\_\_\_

Teacher \_\_\_\_\_  
First name, last name of the teacher

MINSK, 20\_\_\_\_

## PASSPORT PART

First name, last name of the patient \_\_\_\_\_

Age \_\_\_\_\_ (birthdate) \_\_\_\_\_

Address \_\_\_\_\_

The name of children's collective which is visited by the child \_\_\_\_\_

Date of the last visit of children's collective \_\_\_\_\_

Date of receipt \_\_\_\_\_ Day of illness \_\_\_\_\_

Date of discharge from the hospital \_\_\_\_\_

Illness outcome: recovery, improvement, without change, deterioration, death (to emphasize)

Who directed the patient? (name of medical institution) \_\_\_\_\_

The diagnosis of the directed establishment \_\_\_\_\_

The diagnosis at receipt \_\_\_\_\_

The clinical diagnosis:

Basic, date of establishment \_\_\_\_\_

Complications of illness \_\_\_\_\_

Concomitant diseases \_\_\_\_\_

Number of bed -days \_\_\_\_\_

## COMPLAINTS OF THE PATIENT ON \_\_\_\_

To find out complaints from the patient, his parents or relatives on the date of visit.

### ANTECEDENT ANAMNESIS (*Anamnesis morbi*)

1. Date of a disease (to specify exact time if it is possible).
2. Character of the beginning of a disease (sudden, sharp, gradual) with a detailed statement of initial symptoms of a disease.
3. Dynamics of development of a disease with reflection of date of emergence of each new symptom.
4. Prodromalny period and its character.

5. Complaints of the patient (parents or relatives) at the time of a disease and the loudspeaker of clinical symptoms (it is necessary to specify date of emergence of pathological changes and their duration — minutes, hours, days, months, years; constancy or frequency).

**To choose from following if necessary:**

1) *conduct of the child*: agitation, convulsive readiness, sluggishness weakness, reduction or absence of consciousness, convulsions;

2) *temperature*: normal, mild pyrexia, to 39 °C, is higher than 39 °C, a constant, shivering, perspiration (night, profuse);

3) *headache*: character, localization, frequency;

4) *dream*: duration, quiet or uneasy, sleeplessness;

5) *rash on skin and mucous membranes*: it's character, localization, staging of a rash, existence of an itch and the temperature reaction accompanying rashes;

6) *articulate, muscular pains*: their localization, character (the constants aching), gait change (in what it is shown);

7) *voice*: loud, silent, change of a timbre (husky voice, hoarseness, aphonia);

8) *cough*: constant, periodic, dry or damp, barking cough, respiratory standstill during cough, existence of reprises, paroxysmal cough;

9) *appetite*: is kept, reduced, absentee, disgust for food (what?);

10) *thirst*: dryness in a mouth, the complicated swallowing, a sore throat;

11) *nausea, vomiting*: frequency rate, character of emetic masses, communication with meal, waters, drugs;

12) *abdominal pain*: localization, irradiation, communication with meal, constant, cramp-like pain;

13) *characteristic of peristalsis*: tenesmus, abdominal distension, rumbling of intestines, loss of a rectum;

14) *stool*: the frequency, the color, a smell, a consistence (formed stool, porridge-like stool, liquid, watery feces), availability of pathological impurity (slime, greens, pus, blood in a look a streak or a thaw), undigested particles of food, volume (plentiful, poor);

15) *urine*: color, frequency of an urination, pain at an urination, pain in lumbar area;

16) *vision*: decrease, flashing of front sights, a grid or fog before eyes, double vision, etc.

6. Primary address to the doctor, preliminary diagnosis, treatment at home (preparations, doses, duration, shipping, efficiency).

7. Laboratory researches in polyclinic (results).

8. Course of disease in a hospital and efficiency of the carried-out therapy (prior to the beginning of a visit).

## EPIDEMIOLOGICAL ANAMNESIS

1. What factors the patient (parents) connects a disease: contact with similar patients, accommodation in epidemic unsuccessful district, the endemic center, trips abroad and to what countries for the last 2 years, care of animals.
2. Disease incidence in child care facility which is visited by the patient.
3. The use of dirty vegetables, fruit, substandard products and canned food, use of water from an unchecked source, existence of ektoparazit, stings animals, injections, surgeries, bruises, etc.
4. Immunological status:
  - vaccination (what, when, how many time, intervals, reactions to an inoculation);
  - introduction of medical serums (what, when, way of introduction and their shipping).

## PATIENT ANAMNESIS (*Anamnesis vitae*)

### A. Information on parents and relatives:

1. State of health of parents and close relatives, existence of chronic hereditary diseases, chronic virus infection carrier state or bacteria carrying.
2. From what pregnancy the child was born; as the real pregnancy and childbirth proceeded; than the previous ended.

### B. Information on the child:

1. Childbirth was in time or not?
2. I cried at once or not (a look and duration of asphyxia).
3. The body weight and growth at the birth.
4. Nature of feeding (natural, artificial, mixed), terms and time of introduction of feedings up.
5. For what day of life the umbilical rest? How the umbilical wound began to live disappeared?
6. Whether there was ajaundice, its intensity and duration?
7. For what day of life it is discharged from maternity hospital?
9. Neuropsychic development: lag, advancing, compliance to age.
10. The diseases postponed earlier (what, when).
11. Allergy anamnesis: allergic reactions and diseases, including reactions to foodstuff and medicines.

## OBJECTIVE EVIDENCE (Status praesens)

### On day of visit

Date \_\_\_\_\_ day of illness \_\_\_\_\_ day of treatment \_\_\_\_\_

**General view of the patient.** *General state:* satisfactory, average weight, heavy, very heavy, moribund. *Position of the patient:* active, passive, adynamic, compelled (on one side, a meningealny pose, etc.).

*Consciousness:* clear, somnolentia, sopor, stupor, coma.

*Look:* calm, excited, feverish, masklike, suffering. Temperature \_\_\_\_\_

Weight \_\_\_\_\_ Growth \_\_\_\_\_ Assessment of physical development \_\_\_\_\_

**Skin.** *Colour:* pink, red, pallid, icteric, cyanotic, marmorate, sallow complexion etc. *Turgor:* normal, lower, very lower. *Humidity:* normal, high, lower (dry).

Having combed existence on skin, decubitus, giperkeratoz, hematomas, gemangiy, hypostases, expansion of veins; their localization, staging of emergence.

**Rash:** localization and type (roseola, macula, haemorrhage, vesicle, papula etc.). Itch.

**Mucosa.** Coloring of the visible mucous. Damp, dry. Existence of raids, thrush, hemorrhages, enanthema, erosion, ulcers and other pathological changes.

**Subcutaneous fat.** Extent of development of a subcutaneous fat (thickness of fatty folds). At insufficient development of a hypodermic and fatty layer to define hypotrophy degree, and at superfluous — sue. Hypostasis: the general, local (persons, cervical cellulose, extremities).

**Lymph nodes.** Size it's (mm), form, consistence, mobility, sickliness and primary localization of pathologically changed lymph nodes, cohesion among themselves and with the subject fabrics, change of color over them, fluctuation existence. Existence of lymphadenopathy: regional, polylymphadenopathy, generalized.

**Salivary glands.** To define degree of increase and existence of morbidity in the field of parotid and submaxillary salivary glands, change of skin color over them, their consistence, fluctuation existence. The availability of a symptom of Murson.

**Muscular system.** General development of muscles: good, moderate, weak. A muscle tone, morbidity at a palpation or the movements. The availability of an atrophy, hypertrophy or consolidations.

**Osteoarticular system.** The availability of pains in bones and joints, their character and force. Deformations, cracks, thickenings, swelling, fluctuation, crunch, contractures, ankylosis. Hillocks and softening of bones of a skull, condition of big and small fontanel, their edges. The movement volume in joints.

**Respiratory organs. Dyspnea.** It's character and expressiveness. Frequency of the respiration in a minute.

**Cough:** emergence time (day, night) and it's character (dry, damp, «barking»), frequency (constant or paroxysmal), attack duration (painful, painless), existence of reprises.

**Phlegm:** mucous, purulent, mucopurulent, blood impurity.

**Pain in a breast:** localization of pain and it's character (sharp, stupid). Communication of pain and intensity of the movement, physical tension, depth of breath or cough.

**Nose:** breath free, complicated. Separated from a nose: quantity and character (serous, purulent, bloody).

**Voice:** loud, pure, hoarse, silent, hoarse voice, aphonia, twang.

**Chest:** normal, emphysematous chest, rickets breast, keeled chest, funnel chest ect. Deformation of a thorax, existence of rachitic beads. Uniformity of expansion of both half of a thorax at breath. Condition of intercostal intervals (participation of auxiliary muscles in the act of breath, retraction of pliable places of a thorax).

**Definition of voice trembling.** Comparative percussion of lungs, the characteristic of a percussion sound (pulmonary, muffled, existence of obtusion, dullness, a timpanit or box sound).

**Topographical percussion of lungs.** Border of lungs on middle clavicular and on middle axillary scapular lines from both parties.

**Comparative auscultation of lungs.** Type of breath: puerilny, vesicular, rigid, weakened, the extended exhalation, amphoric breath sounds, lack of respiratory noise.

**Rales:** dry rales (whistling, buzzing), bubbling rales (large bubbling rales, medium moist rales, small bubbling rales), a crepitation. Existence of noise of friction of a pleura.

**Cardiovascular system.** The top push of heart (poured or not) is defined visually or in time of palpation (in what intercostal space).

**Percussion:** heart borders (right, left in the 5th or 4th intercostal space, in the 3rd intercostal space and width of vascular bundle.).

**Auscultation:** tones of heart (clear, the deafs clapping), bifurcation and splitting of tones. Accents, gallop rhythm (precordial, ventricular). Noise in heart and their relation to phases of cardiac activity (systolic, diastolic). Heart rate in a minute.

**Investigation of vessels:** inspection of arteries, the degree of swelling and pulsing jugular veins.

**Pulse:** frequency in a minute, tension degree (weak, satisfactory), a rhythm (correct, arrhythmic). Respiratory arrhythmia, other violations of a rhythm. Size of arterial pressure (systolic and diastolic).

**Digestive organs. Appetite:** normal, low, absent. Thirst.



**Oral cavity:** coloring mucous, existence of an enantema, oral moniliasis, hyperaemia, Belsky-Filatov-Koplik spots, ulcers. Number of teeth, existence of caries in them.

**Tongue:** dry, wet, it is laid over by a raid and its color, «crimson», «chalky», «geographic», «laked», existence of prints of teeth.

**Pharynx:** hyperaemia (diffuse or limited), palatine tonsils are normal or hypertrophy and increase degree of them, existence of films on almonds (fibrinózny, necrotic, continuous, extends out of limits of palatoglossal archs), color of a film (white, yellow, grayish-white, gray, dirty color), existence of purulent follicles, abscesses, ulcers. Existence vesicles on palatoglossal archs. Back wall of a throat: hyperaemia, cyanosis, films, increase in follicles.

**Uvula:** hyperemic, edematic, it's mobility, ulcers, vesicles.

**Smell from a mouth:** fetid, sweetish, putrefactive, acetone, etc.

**Symptoms of upper dyspepsia:** existence of regurgitation, nausea, vomiting (single, recurrent, repeated), pyrosis.

**Abdomen:** configuration, existence of a meteorizm, retraction of a stomach, participation in the act of breath, visible peristalsis and anti-peristalsis, existence of a venous network, divergence of muscles of a abdomen, existence of hernias (inguinal, umbilical, femoral, white line of a abdomen), infiltrate, invaginát, pains, symptoms of irritation of a peritoneum: painful zone of Shoffar, painful points of Dezharden, Mayo-Robson, Shchetkin-Blyumberg, Voskresensky, etc. The tension of muscles of a abdomen at a palpation: general or localized. At newborns: condition of an omphalos (hyperaemia, weeping, purulence, existence of the separated).

**Liver:** pains in the right hypochondrium (constant, colicky pain) their force, irradiation. Percussion delimitation of a liver (top, lower), the liver sizes across Kurlov. Liver palpation: the keen edge rounded a consistence (elastic, dense, firm), a surface (smooth, hilly), morbidity at a palpation and its localization.

Palpation of a place of a projection of a gall bladder. Vesical symptoms (Murphy, Kerr, Myussi, Ortner, etc.).

**Spleen:** presence of pain in the left upper quadrant (blunt, sharp). Percussion: the definition of the transverse dimension and the length of the spleen. Palpation: sensitivity, density, roughness. Existence of pains in the left hypochondrium (blunt, sharp). Percussion: determination of diameter and longitudinal axis. Palpation: sensitivity, density, tuberosity.

**Stool** (stateful, liquid, soft, abundant, washy, scant), rate, colour, smell, presence of pathologic impurity and helminthes.

**Urogenital system.** Pains in lumbar area and their characteristic. A swelling in kidneys. Palpation of kidneys, their mobility. Symptom of tapotement. Bladder (palpation, percussion). Pains at an urination. The urine volume, color, rate of an urination and allocation from the urethral channel (pus, blood).

**Thyroid gland:** size, consistence, symptoms of Grefe, Mebius.

**Vision:** nystagmus, strabismus, ptosis, anisocoria, visual acuity, presence «nebula», «net», «flys» in front of eyes, diplopia, keratitis, conjunctivitis, exophthalmus, width of fissures of eyes, glitter of eyes. The color of sclera. Tremor of the palpebra with eyes closed.

**Hearing:** hearing acuity in the left and right ear (normal, low). Secretion from a ear, palpatory tenderness on the tragus and mastoides.

**Nervous system. Consciousness** (clear, disturbance of consciousness, stupor, sopor, unconscious, coma), delirium, hallucinations. Compliance of age and mental development.

**Conduct:** active, passive, disturbing.

**Cephalalgia:** cyclic, constant, its localization, following of nausea, vomiting.

**Giddiness:** buzzing in the head, buzzing in the ears, syncope, readiness for convulsions, convulsions.

**Gait:** normal, shaky, ataxic gait, paralytic. Romberg's symptom.

**Pupils:** size, reaction on the light.

**Reflexes:** tendinous, peritoneal, conjunctive, pharyngeal. Availability of pathological reflexes. Dermographism.

**Sensitivity of skin:** lower, higher (tactile, painful, thermic).

**Meningeal symptoms** (rigid muscles of neck, Kernig's symptom, Brudzinsky symptom upper, lower ect.). At the childrens up to one year: bulging of fontanel, tension and pulsation of fontanel, Lessage's symptom.

## INTERIM CLINICAL DIAGNOSIS

**Interim diagnosis:** \_\_\_\_\_

It is propose on the basis of data of inspection of the patient (complaints, the anamnesis of an illness, epidemiological anamnesis, results of objective examination).

**Concomitant diseases:** \_\_\_\_\_

## **THE PLAN OF EXAMINATION AND TREATMENT OF THE PATIENT**

1. The main and additional methods of examinations (which you consider necessary to appoint).
2. The plan of treatment:
  - 1) regimen;
  - 2) ration;
  - 3) medicine (which you consider necessary to appoint):
    - etiotropic therapy;
    - pathogenetic therapy;
    - symptomatic remedies.

Signature of the student \_\_\_\_\_

### **LABORATORY FINDINGS AND CONCLUSION OF THE CONSULTATION (with obligatory interpretation of all pathological changes)**

The results of all laboratory, tool, radiological researches in dynamics and also given consultations of experts and consultations with the indication of date correspond.

### **EXPLANATION OF THE DIAGNOSIS (principal diagnosis)**

The anamnestic data, clinical and laboratory data is carried out specifically concerning a disease at the supervised patient with use of complaints.

*Concomitant diseases:* \_\_\_\_\_

### **DIARYS (not less than 3 days)**

The diary has to reflect dynamics of a course of disease (improvement, deterioration, without changes) with the daily description of a condition of the patient during the period of the curation.

|   |   |  |
|---|---|--|
| <b>Date, T° (in the morning, in the evening) heart rate in a minute, frequency of the respiration in a minute</b> | <b>The detailed description of a condition of the patient on the date of a curation</b> | <b>Prescriptions in a hospital (at the time of a curation)</b> |
|---|---|--|

Signature of the student \_\_\_\_\_

## THE TEMPERATURE LIST

### PROGNOSIS

Favorable, unfavorable prognosis. Estimated residual effects after suffering an infectious disease.

### EPICRISIS

First name, last name of the patient \_\_\_\_\_  
Age \_\_\_\_\_  
Date of receipt \_\_\_\_\_, day of illness \_\_\_\_\_ (or was hospitalized in the City Children's Infectious Diseases Hospital from \_\_\_\_\_ to \_\_\_\_\_).  
The diagnosis of the directed establishment \_\_\_\_\_  
The clinical diagnosis (principal diagnosis) \_\_\_\_\_  
Complications \_\_\_\_\_  
Concomitant diseases \_\_\_\_\_  
The examination (to specify date and results of the conducted laboratory, radiological researches in dynamics, the conclusions and date of tool methods of inspection and survey of narrow experts) \_\_\_\_\_  
Treatment is carried out (to list all preparations with the indication of daily allowance and/or course doses) \_\_\_\_\_  
The efficiency of the treatment \_\_\_\_\_  
The outcome of the disease \_\_\_\_\_  
Was discharged under the supervision of a pediatrician or other specialist \_\_\_\_\_ or continue treatment in this hospital \_\_\_\_\_  
Recommendations to the patient at an extract it is detailed: mode, food etc. \_\_\_\_\_  
Recommendations to the local pediatrician or other expert in need of further treatment at home \_\_\_\_\_  
The number of bad-days is spent \_\_\_\_\_

### REGULAR MEDICAL CHECK-UP

What expert has to make regular medical check-up for had this infection, nature of supervision and inspection.

The period of regular medical check-up

The rules of the admission in children's collective after an extract from a hospital.

Signature of the student \_\_\_\_\_

## LITERATURE

1. *Германенко, И. Г.* Примерный план обследования больного и написания истории болезни по детским инфекционным болезням : учеб.-метод. пособие / И. Г. Германенко, А. А. Астапов, А. М. Чичко. Минск : БГМУ, 2005. 20 с.
2. *Детские* инфекционные болезни. Лечебная практика : учеб. пособие / В. М. Цыркунов [и др.]; под. общ. ред. проф. В. М. Цыркунова, проф. В. С. Васильева, доц. А. А. Астапова. Минск : АСАР, 2013. 512 с.
3. *Практические* навыки педиатра : практическое пособие / М. В. Чичко [и др.] ; сост. и ред. М. В. Чичко. Минск : Книжный дом, 2005. 848 с.
4. *Схемы* написания историй болезни детей с инфекционной патологией : учеб. пособие / Л. А. Гульман [и др.]. Ростов н/Д : Феникс ; Красноярск : Издательские проекты, 2007. 128 с.

## CONTENTS

|  |    |
|--|----|
| Desing of the title page.....                              | 3  |
| Passport part .....  | 4  |
| Complaints of the patient on .....                         | 4  |
| Antecedent anamnesis (Anamnesis morbi).....                | 4  |
| Epidemiological anamnesis .....                            | 6  |
| Patient anamnesis (Anamnesis vitae).....                   | 6  |
| Objective evidence (Status praesens).....                  | 7  |
| Interim clinical diagnosis .....                           | 10 |
| The plan of examination and treatment of the patient.....  | 11 |
| Laboratory findings and conclusion of the cosultation..... | 11 |
| Explanation of the diagnosis .....                         | 11 |
| Diarys.....  | 11 |
| The temperature list.....                                  | 12 |
| Prognosis .....  | 12 |
| Epicrisis .....  | 12 |
| Regular medical check-up .....                             | 12 |
| Literature .....   | 13 |

Учебное издание

**Астапов** Анатолий Архипович  
**Манкевич** Римма Николаевна  
**Ластовка** Инна Николаевна

**ПРИМЕРНЫЙ ПЛАН ОБСЛЕДОВАНИЯ ПАЦИЕНТА  
И НАПИСАНИЯ МЕДИЦИНСКОЙ КАРТЫ  
СТАЦИОНАРНОГО ПАЦИЕНТА  
ПО ДЕТСКИМ ИНФЕКЦИОННЫМ БОЛЕЗНЯМ**

**THE MODEL PLAN OF EXAMINATION  
OF THE PATIENT AND WRITING  
OF THE MEDICAL HISTORY  
OF THE STATIONARY PATIENT  
ON PEDIATRIC INFECTIOUS DISEASES**

Учебно-методическое пособие

На английском языке

Ответственный за выпуск А. А. Астапов  
Переводчик И. Н. Ластовка  
Компьютерная верстка С. Г. Михейчик

Подписано в печать 23.04.15. Формат 60×84/16. Бумага писчая «Снегурочка».

Ризография. Гарнитура «Times».

Усл. печ. л. 0,93. Уч.-изд. л. 0,55. Тираж 40 экз. Заказ 323.

Издатель и полиграфическое исполнение: учреждение образования  
«Белорусский государственный медицинский университет».

Свидетельство о государственной регистрации издателя, изготовителя,  
распространителя печатных изданий № 1/187 от 18.02.2014.

Ул. Ленинградская, 6, 220006, Минск.

Репозиторий БГМУ