

## History taking of Functional Constiration

Equipment		
1	8	
2	9	
3	10	
4	11	
5	12	
6	13	
7	14	
Procedure		
	Introduce yourself and ask the patient's name. Start with open-ended/non-medical/don't ask	
	multiple questions in a row. without waiting for an answer The sequence of events is not	
0	confusing. periodically repeat or ask again when necessary	
1	Proper display of body language (eye contact, interested attitude, nod)	
2	History taking, abdominal pain, pain location pain characteristics duration of pain each time	
	pain frequency Waking up at night because of pain Factors causing pain to increase and	
3	decrease Have you ever had stomach pains that come and go	
	Joint symptoms Vomiting/flatulence nature of defecation fecal characteristics Number of	
4	times/frequency of defecation	
	Bloody bowel movements/fettering and pain in the buttocks When did constipation start?	
	Behavior that indicates that you hold your stool such as standing, twisting, or fecal	
5	incontinence	
	Other history History of eating spicy food/soft drinks previous treatment Eating a diet high in	
6	fiber, fruits and vegetables	

TEL: 090-979-1212 Website: <u>www.Jia1669.com</u> Line: @jia1669 Fb.com/Jia1669