

Table 1: Avoiding errors when eliciting an insightful history of present illness

Task	Error	Example	Solution	Example
Comprehension	Ambiguous language	Doctor: "When did the fatigue start?" Patient: "Only recently."	Avoid jargon or vague language	Doctor: "When you say 'recently,' what do you mean?" Patient: "Not long, maybe 1 or 2 years."
	Tacit misunderstandings	Doctor: "Have you had any pains?" Patient: "No."	Give permission for the patient to say more	Doctor: "Describe your pains to me, even things you wouldn't usually tell a doctor." Patient: "OK."
Recall	Failures of memory	Doctor: "Have you noticed anything else that has changed?" Patient: "No."	Use diaries and careful records	Doctor: "Start a daily diary and show it to me at our next visit." Patient: "OK."
	Automatic shortcuts	Doctor: "Do you have a cough, diarrhea, sore throat, constipation?" Patient: "No."	Organize and focus questions	Doctor: "Do you have a cough or sore throat?" Patient: "No." Doctor: "How about diarrhea?"
Evaluation	Inconsistent expectations	Doctor: "How do you feel?" Patient: "Fine, it's my son who is worried about me."	Set realistic expectations	Doctor: "What's your view of the situation and what's your son's view of it?" Patient: "Well,"
	Faulty personal beliefs	Doctor: "Any problems?" Patient: "No, just normal aging."	Be wary of false beliefs	Doctor: "Any problems?" Patient: "No, just normal aging." Doctor: "But how might things be better?"
Expression	Extraneous distractions	Doctor: "Is there anything else?" Patient: "No."	Take into account temporary moods	Doctor: "Is there something distracting you right now?" Patient: "Well,"
	Ignoble failures	Doctor: "Hello, let me introduce myself." Patient: "Oh, you're the doctor?"	Double-check for subtle prejudice	Doctor: "I may not be what you expected." Patient: "Yes, it's a bit of a surprise."

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