

## History and Physical

### Chief Complaint

**History of Present Illness:** The narrative should include pertinent items of the 5 bio-psychosocial care domains (see figure) that directly impact the presenting condition. Effects of the present illness on functional status should be noted.

### Past Medical and Psychiatric History:

Specifically enquire regarding mental health diagnoses, communicable diseases, and exposure-related conditions. Gynecologic history if indicated.

**Medications, Allergies:** Include assessment of adherence related to resources, access to food/water, storage limitations, etc.

**Family History:** Include mental health conditions and substance use disorders.

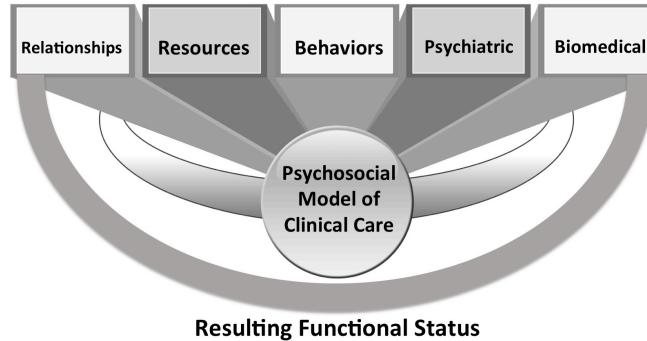
### Social History:

- **Social supports:** friends, relatives, support programs and professionals; negative relationships, high risk sexual interactions and interpersonal violence
- **Resources:** housing status, living environment, food access and sufficiency, childcare, income, transportation, health insurance
- **Behaviors:** substance use, somatization
- **Function:** ADLs, IADLs, education level, occupation and employment, literacy, numeracy

**Review of Systems:** consider queries for weight loss/chills (HIV/TB); cough/hemoptysis (TB, tobacco related disease, or other infectious pulmonary disease); skin lesions; foot concerns; genitourinary discharge or dysuria; mood concerns, hallucinations, or thought concerns.

**Physical Examination:** With deference to patient comfort and tolerance, include assessment of skin, feet, mood, affect, and mental status.

## Bio-Psychosocial Care Domains



### Resulting Functional Status

1. **Social Support Systems:** personal connections, relatives, and friendships. May be positive or negative, such as interpersonal violence.
2. **Community and Environmental Resources:** health insurance, housing, transportation, community environment and safety, food security, childcare, income.
3. **Behavioral and Substance Use Disorders:** personality disorders, substance use, somatization.
4. **Psychiatric Disorders:** major conditions such as major depression, bipolar disorder, and schizophrenia.
5. **Biomedical Conditions:** communicable diseases such as TB, HIV, STIs, hepatitis, and respiratory diseases; complications of exposure such as skin diseases, frostbite, and trench foot; complications of tobacco, alcohol, and substance use; vitamin deficiency and malnutrition; sequelae of chronic diseases.

**Resulting Functional Status:** the net effect of all domains on a patient's life. Includes level of education, employment, social interactions, community roles, and life skills.

- ADLs: eating, bathing/toileting, getting in and out of bed/chairs, dressing/grooming
- IADLs: medication management, driving, food access and preparation
- Education level, occupation, literacy, numeracy, social and community engagement

## Assessment and Plan

**Assessment:** Summarize and interpret the presenting history. Include salient contributing concerns from the psychosocial domains. Summarize and interpret the pertinent findings from the physical exam and review of available data.

**Problem List** with necessary related differential diagnoses, diagnostic plans, and therapeutic plans. A comprehensive problem list would include:

- **Presenting complaints:** findings to related to chief complaint, urgent concerns, or unstable conditions
- **Biomedical Conditions:** chronic health issues requiring active management, minor medical findings
- **Psychiatric Disorders:** conditions impacting self management, function, access to care, or quality of life
- **Behavioral and Substance Use Disorders:** identified stage of behavioral change, assessment of self efficacy
- **Social Support Systems:** conditions requiring monitoring, counseling, intervention; sources of positive support for role modeling or self management assistance
- **Community and Environmental Resources:** Identified concerns related to housing, community environment/safety, food security, child care, transportation, health insurance, income, etc.
- **Health maintenance:** risk-based assessment for transmissible diseases, substance related diseases, nutritional deficiencies, exposure related conditions, and standard screening

## Supporting Behavioral Change

### Promote Self Efficacy

- Emphasize previous successes
- Identify successful role models
- Express your confidence in the patient
- Educate the patient on what to expect physically during the planned change

### Support Change Management

- Pre-contemplators: Address barriers to change; avoid breeding resistance.
- Contemplators: offer a 'road map' to successful change, early goal setting, encouragement, information, & follow-up.
- Planners: develop a practical plan reflecting barriers, motivators, and triggers. Incorporate SLAM goals (specific, limited, achievable, measurable).

## Resources

### Substance Treatment

- National Council on Alcohol and Drug Dependence: [www.ncadd.org](http://www.ncadd.org)
- Substance Abuse and Mental Health Services: <http://www.samhsa.gov>
- Local:

### Interpersonal Violence

- National Domestic Violence Hotline: 1-800-799-SAFE [7233], [www.ndvh.org](http://www.ndvh.org)
- Local:

### Financial Resources

- Medication access: [www.needymeds.org](http://www.needymeds.org)
- Local:

### Housing

- Homeless Veterans: [va.gov/homeless](http://va.gov/homeless), 877-4AIDVET [877-424-3838]
- Local:

## Key Members of My Local Care Team

Social Work:

Case Management:

Clinical Pharmacy:

Nursing:

Substance Treatment:

Mental Health Counseling and Psychiatry:

Other:

For suggestions on use of this tool, more extensive resource suggestions, and didactic content, review the complete curriculum available at:  
**[caringwithcompassion.org](http://caringwithcompassion.org)**

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# Caring with Compassion

[caringwithcompassion.org](http://caringwithcompassion.org)

A Guide for Providing Clinical Care  
Across the Bio-Psychosocial  
Domains

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[caringwithcompassion.org](http://caringwithcompassion.org)

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