

GI checklist

What to ask patient with GI symptoms?

You don't have to ask all these questions

(ask what you need depending on your differential diagnosis)

Common presenting symptoms:

1-Mouth symptoms:

- Bad breath: due to gingival dental or pharyngeal infection.
- Dry mouth.
- Altered taste.
- Foul taste.

2-anorexia and weight loss:

- Loss of appetite:** do you still enjoy food?

- Weight loss:**

خسرت وزن خلال اخر فترة؟

كم كان وزنك وكم صار؟ وخلال كم أسبوع نزل وزنك؟

3-pain: REMEMBER if positive do SOCRATES for it.

- **painful mouth:** ask if there is any sores or ulcers and if there is any pain.
- **heart burn and reflux:** may be associated with: water-brash and taste of acid in the mouth.
- **Dyspepsia (عسر هضم):** pain or discomfort in the upper abdomen.

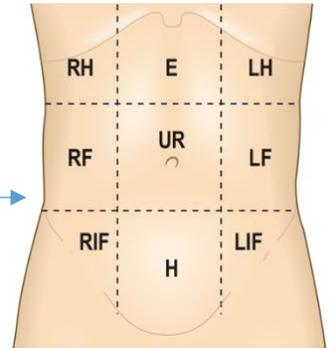
Dyspepsia that is worse with empty stomach = typical for peptic ulceration.

- **Odynophagia and Dysphagia:** pain and difficulty while eating.

Is the pain precipitated by solids or liquids or both?

- **Abdominal pain: Do SOCRATES.**

Site: ask the patient to put his finger in the area where he feels pain.



Onset: sudden or gradual? Constant or episodic? Rapidly or slowly progressing?

Character: dull or sharp? Lasts for seconds or minutes or hours? *colic pain = *منص**

Radiation: to shoulders, back, intrascapular region, Rt. iliac fossa, groin and genitalia...

Associated symptoms: any other symptoms that occur with the pain, in other systems in the body like palpitations, breathlessness, shock, tachycardia, hyperesthesia....

Timing: ask about:

the timing of every symptom, when it started, after what, before what, while doing what?

Change in pattern of symptoms? at night or at morning? After eating? After drinking? When hungry?

Exacerbating and relieving factors: what happens to the pain with:

movement? Coughing? Eating certain foods(spicy)? smoking? Drinking? Stress? Drugs?

Severity: from 10? Relieved by drugs like opioids or not?

4-Nausea and vomiting: ask about:

Relation to meals and timing? At night or early in the morning?

Associated symptoms: Such as abdominal pain and if these associated symptoms are relieved by vomiting?

Vomit is bile stained (green) or blood stained or faeculent?

Associated weight loss or gain?

What medications the patient have taken before symptoms started?

Any chronic diseases?

5-Wind and flatulence (إخراج الريح): used to relieve abdominal discomfort.

6-Abdominal distention: different from obesity.

Ask about: Diet? Bowel obstruction and constipation? Pregnancy? Persistent distention or develop during the day and resolves overnight?

7-altered bowel habit: do **SOCRATES**

Diarrhea: explain, acute, chronic or intermittent? Difficulty or pain while defecating?

change in frequency? Consistency? Color? Volume?

Recent travel? Medications?

Constipation: Onset? Frequency? Shape of stool? Associated symptoms? Drugs? Diet?

8-bleeding: 3 types

Ask about: Color? Onset? History of GI diseases? Alcohol? Drugs(NSAIDs and steroids)?

1-**Hematemesis:** vomiting of blood.

2-**Melaena:** passage of shiny black stool.

3-**Rectal bleeding:** mixed with stool or seen on toilet paper?

9-jaundice: ask about:

associated symptoms? Color of stool and urine? Travel history and immunizations? Blood transfusions? Use of IV drugs? Recently prescribed drugs? Alcohol intake?

10-groin swelling and lumps: ask about:

1-Associated symptoms?

2-Precipitating factors such as constipation, cough, or manual labor...

3-Timing, when the symptoms are worse?

Past medical history:

History of similar problem?

Any chronic diseases?

Surgical history?

Drug history:

Ask about all prescribed drugs, OTC, herbal preparations.

Family history:

Any family member with GI complaints?

Social history:

Dietary history?

Food intolerance?

Alcohol?

Smoking?

Stress?

Travel?

IV drug use?

Sexual history?