# OSCE Markscheme - Paediatric History

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| **OPENING THE CONSULTATION** | | |
| **1** | Introduces themselves | |
| **2** | Confirms patient's details | |
| **3** | Establishes presenting complaint using open questioning | |
| **HISTORY OF PRESENTING COMPLAINT** | | |
| **4** | Onset | |
| **5** | Changes in symptoms over time (e.g. worsening) | |
| **6** | Previous medical input | |
| **7** | Previous episodes | |
| **8** | Relieving or aggravating factors | |
| **9** | Ideas / Concerns / Expectations | |
| **KEY SYMPTOMS** | | |
| **10** | Intake of food/feed | |
| **11** | Oral fluid intake | |
| **12** | Urine output | |
| **13** | Stools - consistency and frequency | |
| **14** | Vomiting - frequency, consistency and volume | |
| **15** | Fever | |
| **16** | Rash | |
| **17** | Coryzal symptoms | |
| **18** | Cough and/or increased work of breathing | |
| **19** | Weight change - *loss vs gain* | |
| **20** | Pain - use SOCRATES to explore | |
| **SYSTEMS REVIEW** | | |
| **21** | Screens for symptoms in other body systems | |
| **PAST MEDICAL HISTORY (Including DRUG HX and DEVELOPMENTAL HX)** | | |
| **22** | Antenatal period - *illness or complications during gestation* | |
| **23** | Birth - *delivery complications / prematurity / birth weight* | |
| **24** | Neonatal period - *illness /admission to a special care baby unit (SCBU)?* | |
| **25** | Chronic medical conditions | |
| **26** | Developmental history | |

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| **27** | Growth | |
| **28** | Immunisation history | |
| **29** | Past illnesses, hospital admissions, operations, accidents and injuries | |
| **30** | Regular medications and over the counter medications | |
| **31** | Allergies | |
| **FAMILY HISTORY** | | |
| **32** | Asks about medical conditions in the family and draws family tree if appropriate | |
| **SOCIAL HISTORY** | | |
| **33** | Individuals living with the child | |
| **34** | Parental/Carer occupation | |
| **35** | Housing | |
| **36** | Parental/Carer smoking status | |
| **37** | Relationships/marital status | |
| **38** | Child's play or leisure activities | |
| **39** | Is the child at school/nursery? How are they managing? | |
| **40** | Impact of child illness on the family | |
| **41** | Involvement of social services | |
| **42** | Use of HEEADSSS structure if adolescent or young adult | |
| **CLOSING THE CONSULTATION** | | |
| **43** | Thanks patient | |
| **44** | Summarises salient points of the history | |
| **KEY COMMUNICATION SKILLS** | | |
| **45** | Active listening | |
| **46** | Summarising | |
| **47** | Signposting | |

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