

Brylee Behrens

Patient Care

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### Building Patient History

Throughout my first rotation at Medical Office Building (MOB), I performed a chest x-ray on a 12-year-old girl with an uncontrollable cough. Initially, I introduced myself to the patient and her grandma, ensuring that we were performing a chest x-ray. After the initial interaction, I acted on the two-patient identification process. After I realized that the information was correct, I asked the patient to take everything off from the waist up, including her necklace. I handed her a gown and explained that it opens to the back. When she came back into the room, then I started building the patient history. I asked, "What has been going on?" She replied, "I've had a terrible cough the last few days, and it won't go away." Then I asked, "If there were any activities that she had participated in that could have caused her uncontrollable cough?" She proceeded to tell me, "I participate in Derby races and I'm around a lot of dirt and windy weather."

After the procedure, we finished up the exam and I escorted her out. I relayed the information to my leading tech, Adriana, that was over me. She started to chart the information before sending it to the radiologist. She told the radiologist, "The patient participated in Derby races, and has been around dirt and dust, leading to her uncontrollable cough." This gave the radiologist more background on the patient; ultimately giving the radiologist the reason for the uncontrollable cough. I believe I informed the radiologist so he/she could be more aware of the patient's situation. I do not believe there were any other questions that I could have asked to help the radiologist. Building patient history and relaying the information only benefits radiologists and enables them to diagnose all patients confidently. If I did not relay the information to the radiologist, he would not have known the reason for the uncontrollable cough.

If I were to rate myself I would give myself a 9/10. The information I relayed to the radiologist was quite relevant to the situation. I feel like I could've made the interaction more personable for the patient putting the patient at ease. In addition, I could build a stronger relationship with my patient before jumping right into what was wrong.