

## Social History

The social history, or SH, is the part of the interview where the doctor starts to learn something about the patient as a person. We begin to understand about the patient's feelings and their abilities. The social history is also a record of one's health habits. We learn from the social history about what it means to a patient to get sick, to seek care, to get better, and to stay well. The therapeutic decisions that a doctor will make with their patients require knowing the patient as a person.

The social history can be started by sentences that sound like: "now that I know something about your symptoms, can you tell me a little bit more about yourself?", "now I'd like to talk with you about you and your lifestyle", "some of the questions I'm going to ask you are personal. I ask them of all my patients. You can refuse to answer them if you wish if they're - if that's uncomfortable for you. Please remember that the information you share with me is confidential." And then you ultimately always ask, "do I have your permission to discuss these things with you?"

-Michael, what I'd like to talk about now is what they call the social history part of the exam, and this is where I, as the, um, practitioner get to know a little bit more about you as a person. Some of the things I'm going to ask you are a little bit personal, and I'll tell you when we get to that part of the exam, but you always have the permission to refuse to answer me if you'd like, if for some reason you're uncomfortable answering something please just let me know. And as you need to know also what I am going to ask you is confidential, the information that you give me. But what I'd like to kind of start out with is: tell me where you were born and raised.

-Um, I was born and raised in Chicago, Illinois.

-OK, and how long have you-- did you live there?

-Ah, yes I did.

-OK, I'm sorry, please tell me how long you lived there.

-I lived in Chicago Illinois up until my-- I was thirty years old.

-Oh, OK, OK.

-I'm forty-two now.

-You're forty-two?

-Mmhm

-And what made you move to Madison?

-Um, the rest of my family decided to relocate and I decided to just come with them.

-To come with them, I see, OK. Um, so in your living situation which you're currently involved in, who lives with you?

-I live alone actually

-You live alone, OK. And do you have family and friends here in-- in the Madison area or the surrounding area?

-Yes I do. I live right across the street from my mom.

-Oh! OK, alright. So, is your mom a relationship you could depend on in you if you were sick or you needed help or if you broke your leg and somebody had to come help you, do you have family in town or friends that could help you with that?

-Yes I do

-OK, alright. Um, what I'd like to know a little bit about is what a typical day is like for you

-Um, a typical day? Well I work a lot. So--

-And what kind of-- and you tell me you--

-A residential housing manager

-And how many hours a week do you perform that task?

-Forty-five hours

-Oh, you work a lot, OK, alright. And can you tell me a little bit about that?

-A typical day... well I'm up at six a.m.

-Uh huh.

-And what I do is prepare myself for work. Um, I try to eat a healthy breakfast and I go to work; I'm at work at eight. And usually I work until five, five-thirty, something like that.

-Alright. When you are not working, how do you spend your time?

-Sleeping.

-Getting ready to go to work.

-Getting ready to go to work.

-Alright. What do you do for leisure or for fun?

-Um, I like to go to plays and to see movies... stuff like that.

-OK.

-Sometime's I'll ride my bike.

-OK. Are-- is there-- I always like to ask patients: is there, um, a spiritual community that you're part of here? Or does-- or does, are there spiritual beliefs or cultural beliefs that impact how, you know, your health care is delivered that you would want me to know about?

-No, there isn't.

-OK. I'd like to talk to you a little bit about your diet. Now you talked about it before that you try to eat healthy.

-Mhm.

-Can you tell me what you usually eat for meals and for snacks in a typical day?

-Um, well my breakfast is usually like eggs, bacon, toast.

-Mhm.

-Um, lunch: I have like a salad and chips, something like that.

-OK.

-And meat and potatoes for dinner.

-Are there any groups of food that you either eat too much of or that you stay away from?

-I don't eat-- eat a lot of vegetables.

-OK alright

-Caffeine. Tell me about your caffeine use.

-I drink tea at least once or twice a day .

-OK.

-Caffeinated tea.

-Coffee, colas?

-I don't drink, um, coffee. I do drink soda, maybe once a day.

-OK. And regular exercise. Tell me about that.

-Um, I haven't exercised in quite some time.

-OK

- I'd like to hear a little bit about your sleep. You've mentioned before that when you're not working you're sleeping. Uhm with your job, do you tend to have your sleeping at the nighttime hours or during the day? Or when do you sleep?

- I sleep nights.

- You sleep nights. And how many hours of sleep a night do you get?

- I get seven, seven and a half hours of sleep.

- Is it restful sleep?

- Not really. It's very interrupted for some reason.

- And how is it interrupted?

- It... I wind up waking up at one or two. I sleep in like two-hour intervals.

- I see. Are you tired when you wake up in the morning?

- Sometimes I am. Sometimes I'm not.

- Do you nap during the day at all?

- Uh, I take a short cat nap, like half-hour.

- And does that make you feel more refreshed and and

- It does to be able to continue my day.

- Alright. Uhm, Michael do you participate or I guess if you participate in sports such as skiing, snowboarding, uhm, bicycle riding, skateboarding, do you wear a helmet?
- In...
- You said you ride your bike?
- Yeah, and I don't wear a helmet.
- OK. Alright. Do you. When you drive your car do you wear seatbelts?
- Yes, I do.
- And when you ride, also, in the car. You wear...
- Yes I do. [interjected]
- ...seatbelts all the time. OK. I'd like you to give a...a little bit of thought to either your living situations or your working situations. What I'm trying to ask you right now is: any exposure to things like smoke, ah, fumes, chemicals, radiation, loud noise?
- Mmm, no.
- No?
- No.
- OK. Alright. The next set of questions that I need to ask you are some of the more personal ones that I told you I was going to be getting to, and, and we're at that part of the interview now. And again, I'm asking your permission to talk with you about them, and please don't answer anything that you feel uncomfortable with.
- OK
- Uhm, tattoos or piercings?
- Ah, I have my ears pierced.
- OK. And may I ask where you. Where, oh, let me rephrase it. Did you get those pierced in the United States?
- Yes, I did.
- OK. And how long ago?
- Ah, I have, like seventeen, eighteen years ago.
- OK. Alright. Alright. Uh, tell me about your tobacco use.
- Uhm, I quit smoking about two years ago.
- Congratulations!
- Thank you.
- That's quite a battle. That's quite a battle. Let...I'd like to hear a little bit more about when you did smoke.
- I started smoking at the age of seventeen.
- Uh-huh.
- Uhm, my smoking from seventeen to like twenty-three I smoked maybe a half a pack a day.
- Uh-huh
- And by the time I was twenty-three I think I started smoking like a pack a day.
- OK.
- Yeah.
- Alright.
- And I smoked for well over twenty-four, twenty-five years.
- OK. And you have quit now for two years?
- Yes, I have.
- Again, congratulations.
- Thank you.
- Any chewing of tobacco? Any cigars? Any pipes?
- No.
- OK. Alright. Tell me about your alcohol use.
- Uhm, I quit drinking five years ago.
- OK. And when you say you quit drinking, you no longer drink any alcohol at all?
- No, I don't.

- Of any type?
- No.
- OK. What made you decide to quit?
- It became a problem.
- It became a problem. Can you tell me a little bit about that?
- Uhm, I started drinking at the age of seventeen, and my drinking had gotten me into so much trouble by the time I turned forty, you know...
- And, can you describe a little bit about the type of trouble you're talking about?
- Uhm legal trouble, financial trouble
- OK. Really disrupted your life?
- Yes, it did.
- OK. And, this when you quit five years ago, was that the first time you had attempted to quit?
- That was the first time I
- OK
- attempted to quit.
- And you quit successfully since then?
- Yeah.
- OK. Alright. Uhm, any recreational drug use?
- No.
- No. OK. Not now, not ever?
- No.
- OK. I want to talk with you a little bit about your sexual health.
- OK.
- Uhm, any sexual health concerns that you have?
- No.
- No. Uh, are you sexually active?
- No, I'm not.
- No. When was the last time you were?
- Five years ago.
- OK. And when you were sexually active, were your partners men, women, or both?
- Men.
- Men.
- Mm-hm.
- What did you do, uhm, and what, at what age did you become sexually active?
- I became sexually active at eighteen.
- OK. When you were sexually active, how did you protect yourself against STIs?
- STIs
- Or pregnancies?
- Condoms.
- Condoms. All the time? Some of the time?
- Most of the time.
- Most of the time.
- Mm-hmm
- Any concerns about hepatitis or HIV exposure?
- No.
- No? OK. Uhm, any concerns about your sexual health now at all?
- No.
- No. Alright. I want to, uh, ask you about economic, uh, factors in your life.
- OK.
- Any concerns about your health insurance or. Mostly what I'm asking about here is your economics as it affects your healthcare.
- OK.

- OK. Any concerns about your insurance, or...how this visit is covered today, or how your healthcare is paid for?
- Actually I got pretty good healthcare.
- OK. Any economic factors in your life that cause a lot of stress for you or, or that you're worried about?
- Mmm, no.
- No. OK.
- Not at this time.
- Any other areas in your life, in terms of stress, that you're worried about?
- Mmm, not really.
- OK. The last question that I want to ask you about is something that I ask all patients because I think it's so prevalent in our society, and that's about violence. Are there any areas in your life where you feel harmed, or disrespected, or at risk, either for your physical health, your emotional health?
- No.
- No.
- No.
- OK. Do you have weapons in your house?
- No, I don't.
- OK. Is there anything else about you socially, as a patient, as a person that you want me to know?
- No, I think you've pretty much covered everything.
- Alright.