



History Taking: Introduction

Transcript

Hello and welcome to *Ninja History Taking Skills For Holistic Practitioners*. I'm Dr. Ritamarie Loscalzo and today I'm going to guide you through how to really hone in and ask the right questions so you can assess what's going on for your client as they come to you with trust and confidence, that you really dig and find out what's really going on with symptoms. When we go through these we are going to break it up into smaller pieces so that you can really understand each piece, and you can study each piece in turn and really master each piece.

You don't have to do all of the questions that we're giving you. For your particular niche or for your particular client it may not be necessary or appropriate to ask everything that's in here. This is very thorough history that we are giving you. It gives you the needed skills to really hone in and really dig deep. It is really important that you don't overlook things because those little things that you forget to ask about may provide the clues and keys for getting the problems solved.

Before we begin let's make sure that you're aware that any of the information I'm presenting here is not intended to replace a one-on-one relationship with a qualified healthcare professional and it's also not medical advice. When you're presenting to your clients need to be really careful and make sure that they are aware that what you're presenting and what I'm presenting here today is intended as a sharing of my knowledge, information, clinical research and clinical experience over many years. I encourage you and you should encourage your clients to make their own health care decisions based upon your research and in partnership with a qualified healthcare professional. This is especially true for folks who are on any medications. I want to make sure that the things we talk about in terms of nutrition do not interfere with the protocols.

Let's talk first about what a functional assessment includes. It is just an overview of what we will be covering throughout the program and then we will hone in on the exam.

What we are talking about now: ninja history taking and interview skills, what does that really mean? That means your ability to be the detective, sleuth around and really dig and understand things that maybe nobody has ever done before.



There is a particular set of questions and histories that you can do. We are going to look at questionnaires and surveys, preferably scorable so that you can look at the objective numbers to say 'wow, we really seen some improvement, we have seen 25% improvement in you in the last month and a half. Your symptoms are showing that. You can do this with surveys about the body and also with nutrition. We are going to have questions that include all aspects of their health, their diet, their environment, their habits, their exposures, their stressors, and their past. We are also going to look at a client's diary analysis and session check forms.

It is really important to have people journal what they are doing because when somebody comes to you and says 'I am not feeling any better I am still having headaches, what is going on?' You get to see what exactly they are doing and you may be able to uncover the clues that help them to make the progress that they are looking to make.

Functional physical evaluation, that is what we will be doing in module two. That is when you do a really thorough exam, not just looking for skin tags and heart rate and things like that, but more looking at functional items that would give you an idea of really what is going on inside. We are going to look at traditional Eastern body diagnosis. We are not going to go into big depth into that you would get at acupuncture school. We're going to go through some of the things that you can include in your own body diagnosis with people easily without having to spend years learning it but they can give you some extra clues.

We are going to look at nutritional deficiency physical clues. That is really important. All of this is going to be covered in the physical exam. We are going to look for signs on the nails, on the hair, on the skin, and the tongue that says 'hey, this person might have these particular nutrient deficiencies'. We are going to look at blood chemistry analysis. That is our all-day seminar where we are going to pull apart what is in the blood and really help you to understand it. It is going to take some time. It is going to take some repetition before you get it, but the more familiar you are with that and the more you understand it, the better able you are to dig for clues.

Finally we will look at functional lab tests. Those would be tests that check the function of various body parts. We do that using saliva, urine, hair, and stool. So this will cover our 14 weeks of course. Where we are right now is *The Art Of Ninja History Taking*. Let's take a look.



Why is it important? I think I've honed in and over and over repeated why it is important because we really want to understand the root causes and what is really going on for a person, not just to tweak their symptoms and give them an herb that will give them more energy without really understanding why the energy is zapped. Even when you are using nutritional approaches you tend to get into the 'symptom-solution', and it is really deeper than that. We want to know what it takes to be thorough. I cannot tell you how many people I see that have come to me from various other practitioners and when I start to do some of my assessments they say, 'nobody ever asked me that before'. 'Well nobody ever looked at that before' and 'nobody ever got the results that I have been looking for', because they were not looking in the right places for them. This is really key: it's being thorough.

We want to learn how to do functional assessments not just static assessments like this is it. A lot of practitioners look at the blood as if it is a static assessment but it is not. If you look at it properly you can get a lot of ideas of how things are functioning rather than is something diseased or not diseased. It is a process that looks at the root cause analysis not just treating symptoms. We could treat symptoms with herbs the same way we could treat symptoms with drugs. Maybe they are not as quick and effective but we really want to get at the root cause and we want to understand what is going on and what behaviors, what habits the person has that has been contributing to it. We want to help them identify risk factors.

We do not want somebody to wake up one day and suddenly have a disease. That disease has been brewing for a long time and if you do not identify the risk factors and help them to make changes to shift that around they could be waking up one day with a 'dreaded' disease.

Early detection. Instead of waiting for liver enzymes to be through the roof and decide that this person has cirrhosis, hepatitis, or fatty liver disease, we are looking functionally at how are the numbers changing over time? Have they been going up? Have they been going down? Have they been becoming deficient? They are not just suddenly deficient. You understand we want to get early detection. We don't want to wait until things are far progressed.

We want to help them with the prevention of disease and dysfunction because there are clues, there are early signs and there are specific conditions that can lead to other conditions and they are reversible if you catch them early enough.

Finally, we want to address the signs and symptoms before they become pathology.



That is why taking a really thorough history and then following up with the exam and the labs that we will be going through, will really help you assess where the person is, where they are heading, and how you are going to change that path so that they do not continue to head down the path of destruction.

Let's look at what are the four pillars of a functional assessment. This is just a review. We are looking at the historical data, the questions that we are going to teach you in this module to ask about. We are going to look at scorecards. We are going to look at the physical body, traditional physical exam which really looks to detect pathology, and then functional testing which looks at reflex points and functional abilities and also some of the Eastern medicine indicators. We are going to look at in-office and at-home testing, because in addition to being able to send someone to a lab for blood analysis or stool analysis or saliva analysis, those things can be expensive. There are quite a number of things that you can do in your own office if you have one or if you have it in your license to be able to do, but also at home so you can teach people how to do that: certain labs and certain measurements that they can do at home like mineral test kits and pH paper and other things like that. There is, of course, the labs where we are going to teach you how to know when a person needs labs, what labs to order, and once you order them how to interpret them. There is also blood, urine, saliva, hair, and stools, which I mentioned previously.

The history taking is a process of getting to know your new client. They may be somebody you have known on a nonprofessional level. That often happens, friends or friends of friends often show up at your door when they hear about your newfound skills. It may be somebody that you have never met before that just called you out of the blue and they say 'hey, I like what you are doing, can you help me?' You want to be able to start from wherever you are starting with them and get to the point of really knowing them intimately. I do not mean being invasive with your questions and I don't mean prying into their personal business. I mean getting to know them and how they function, how they think and feel as well so that you can have protocols and processes and techniques to help them to guide them to get to where they want to go.

The first thing is the initial contact. That can happen in many ways. That can be used speaking to someone at a networking meeting. It can be you meeting somebody at the grocery store or on a bus. Or it could be somebody calling in to your office and saying, 'hey tell me about what you do. I think I want to make an appointment'. At that initial contact you want to ask very inquisitive type questions. You do not want to seem to be prying.



You just want to get to know what is going on for them. Be curious. When you are curious and you are really interested in them, that is when they are going to open up and that is when they are going to be much more amenable to you helping them. So you want that first contact to be really valuable. During that first contact you want to get an understanding, at least a superficial understanding if not a deep understanding, of what is important to this person. What do they really want to be doing with their life, their career, and their relationships? How is their current state of health, or lack thereof, getting in the way of what they really want?

When you can have that information on an initial contact you will then be able to really focus the way you speak to them to help inspire and motivate them rather than scare them with all of the diet and nutrition lifestyle changes that they may have to be making. Then you can have the pre-consultation forms. The initial contact is not where you have an official appointment necessarily, although it might be where you have offered a free consultation or a free discovery session or free strategy session in an attempt to get to know somebody to see if it is a good match for actually working together.

You have pre-consultation forms. These are online forms, or paper and pen forms if you want to be old-fashioned. Sometimes people prefer that; where they are sitting in the waiting room and filling out forms. More and more practices are turning to online forms. You can get these to people before the initial consultation and preferably you sign them up for an initial consultation, you've received payment from them for that initial consultation so that you can get the forms from them and have the time to look through them. And you can do this without running the risk of them setting up an appointment, sending you all their forms, you spending an hour or two going through the forms in preparation, and then they don't show up. Believe me, I have been there and done that. I don't do that anymore.

Before I look at anybody's forms I have to have the check in hand because it is a big investment of my time. When you really learn these skills you are going to be really thorough and it is going to take you a lot of time to really get to know this person to the level that you want to and need to, to help them. By the way these pre-consultation forms, I have samples of all of these and I am giving you both online and paper and pen forms that you can use.

Then you have the moment of truth, the initial consultation. Hopefully by then you have gone through their forms, you have made notes, mental notes and written notes. I will oftentimes take their forms and I will make a little summary sheet and just keep track of what are some of the things you want to know more about.



I will have a list of questions that I want to ask them specifically because they did not give enough information, or that it has piqued my interest because they had a particular surgical procedure and I want to find out more how that happened. I make a list of the things that I want to delve deeper on, a list of things I want clarification on, and I also have a list of what are my thought processes of just going through these online forms, getting a sense of where some of the stress levels lie. You get so much out of a history. We are going to go in detail in this presentation how to do that initial consultation.

You want to get to know them through journals of their daily activities and diet and preferably before that initial consultation, as part of the pre-consultation form packet. You get to get them to fill out some diet diaries and daily activity diaries so you get a sense of how much water they are drinking, what they are eating, how they are exercising, how much do they sleep. You can have them fill out that journal for three days for you. It is really helpful to have that on the initial consultation.

What I find is if I do a thorough job of getting them to fill the forms out in advance, that initial consultation is awesome because either when they walk in the room or get on the phone, whichever way we do the consultation, I feel like I know them, I know so much about them. It is so much more comfortable to be in that position than to be guessing, asking questions, and learning new stuff as they present it, because you do not have as much time to really think about it and formulate your impressions. These are really important pieces of the getting to know your client.

If they have old labs, a lot of people will give them to you, and may get excited because they know you know how to read labs. They may be giving you old labs that they had taken. Don't be surprised if some of them are extremely thorough. I once had a new client, she filled out her paperwork, and then I get this fax, a six sheet page fax from two of her old doctors of all of the labs she had done over the past several years. It was a lot. Did I get to know this person well? Yes. I spent a lot of time before her consultation. But you know what? She has signed up for a six-month program so I was not feeling like 'oh my God, I just charge this person \$150 for what was supposed to be an hour consultation and I spent four hours in advance doing their forms.'

You want to feel in integrity. You want to give them really great value for their investment, but you also want to feel like you are getting the most out of it so if you spend five hours and they have paid you \$150 after all of your training, that is not really great money. You have invested a lot in your education and you want more than that.



Not that you are just doing it for the money but in order to be able to do this, to make a living, and not have to have a day job and help more people, you do have to make a good living at it.

Now we come to the heart of the ninja history taking. We are going to go through what are the components of the thorough history. We are going to take you through 7 to 10 components that I think are really important to have in every good history. Some of the parts you will not really go into as much depth. Some of you may go lighter. Depends on what your niche is and what your objective is with the patient or the client and how deep you really scheduled it to go. If you are a primary care practitioner for these folks and that is where a lot of people use me, as a primary care, they want me to be their go to person, I need to get to know them really, really well. But if they are working with other practitioners and they just come to you for the diet pieces, obviously you are not going to go as deep, but you also want to do a lot of these pieces because you want to know what diet is right for them. You want to know how to follow up and also because unless they are seeing a really outstanding functional medicine practitioner, they are probably not getting a real thorough look at.

[18:49] Let's look at the components of a thorough history. The first one is basic. You know the boring, demographic and general information stuff, where they were born, where they live, how old they are, how much they weigh, those sorts of things. I am going to show you, we have a slide on each of these individual pieces on this particular slide and then we have some actual exam samples. When I say exam I mean consultation and history taking. Samples that you can actually use.

You can use as much as of them as you want or as little as you want. You might want to take them and personalize them but I have given you as many as I can in three different formats. One is the online form, which I use. Not 100 percent of my forms have been converted to online but they are in progress. Then I have given you, where I can, a Word document so that you can actually go in and modify it, personalize it and add some questions of your own, put your header, footer, phone number etc. on it and then there is a PDF if you want to just take it as is, print it out and hand it to someone to use, you can.

As I go through and show you some of the forms I will explain to you that you can use all of these forms or some of them. The reason I did them in separate forms, separate units, was so that if you don't want to do a completely thorough history I did not want to hand you a 27 page history form and say here use this, then you would have a lot of work to do. So I have them as individual ones.



You can print them out separately and give them to people appropriately or you can put them online and have people download them and print them themselves and use them. There are a lot of ways that you can do it.

The demographics, the health goals. The health goals are what is really important to them. Where do they see themselves? How is the current health getting in the way? What is their vision? What is that big vision that just makes them happy and excited and motivated to make the changes that you are going to ask them to make? Next we do the history of the chief complaints. That is terminology, medical terminology. I have used this for consistency for those of you who are coming from more of a traditional medical background. The history of the chief complaint or complaints.

I've got a couple of different forms and formats that you can use where they can fill in what it is that they are really wanting to deal with because you may start to look at them and see this person has a thyroid problem, this person has an adrenal problem, and their chief complaint is they want to get rid of their shoulder pain. Or they have a bellyache that they cannot get rid of and they want to get rid of it. You want to honor what they believe is their chief complaint. What I do is I ask them to list their complaints but list them and give them priorities so that I know in order to be a hero with this person I need to get them some relief quickly from at least their top chief complaint. I have given you room on my form for 10 of them. Hopefully people don't have 10, but you never know. We'll go through the details of what is in that.

[22:08] Current health and exposures. What does that mean? Current health is what is going on right now. That is where you can go through and ask them, do you have any issues with your sinuses? Do you have problems with your cardiovascular? You ever been told you have heart problems? Do you have respiratory problems? Digestive problems? Hormone problems? Just ask them to objectively lay out and write out what problems they see as them having in those places. It is interesting because it is really great to get their perception because sometimes the clients, the patients don't really know where those particular symptoms come from, what system they come from. We are asking them about that. We are asking them about exposures. There are a whole list of pieces that are included in the current health and exposures that you want to make sure you cover.

We definitely need to know their medication and supplements history. Not just what they are taking now because a lot of times people add stuff or they take it away right before they start to talk to you because the figure oh, she is going to tell me to take some vitamins so I am going to start taking some omega-3s because I heard those were good.



Then they come in and they say on the sheet, omega-3s. You don't know if they just started them two weeks ago or you don't know if they started them four years ago and they still have signs and symptoms of omega-3 deficiencies. So you want to know with medications and supplements, when they started them, how long they have been on them, what has the affect been, have they noticed improvement, do they say 'yes this is my favorite supplement don't ever take it away from me because I feel great on it'. Or do they say 'no, I don't know, I read it in a magazine and I thought it was a good idea to take and I have been taking it for three years'. Same with medications. You want to know what medications they are on and what for. I have a form and I will show you, for filling that in.

You want to look at their past health history and their family history. That tells you what kind of risk factors they are set up for now. If they have had specific surgeries, specific illnesses or injuries. They are going to have a weak point or a weak spot in those areas so you want to be noticing that and helping them to be able to improve that. Looking at their family health is just really very valuable because when you look at their family health you are going to be seeing some genetic patterns perhaps and also some kind of lifestyle factors. You may have a family history of obesity but it could be that it is mom's traditional cooking which includes a stick of butter and a whole bunch of gravy at every meal. The kids just grow up portly to say the least because of that versus having a specific set of genetics that predisposes them to a slow metabolism.

We have organ and gland scorecards. These are among my favorites because I use these periodically to reassess over and over again at different intervals, maybe three and six months or a year, to see how people have progressed. It is really great when they do these and they get the answers themselves. I will show you how these work. They actually fill out the form and they get a response back that shows them what their scores are in the different areas. When they see that they have improved or when they see that one area has not, then they say 'okay now we need to work on that stomach acid, I know that we talked about that but I have not been able to take those bitters that you were telling me about but you know what? Everything else has improved and that has not so let's work on that now.' So they are really good for motivation.

We have nutrient evaluation scorecards. I have three different ones that will share with you. You can add to them. You can take away from them, however you want to do it but would I do with those is it gives me a kind of general idea of what clusters of symptoms they have related to specific nutrients. The computerized version saves a lot of time so I love doing those.



Journals and tracking forms, these are the forms that I am providing you some samples and you can add your own of ways that you are going to help them to keep track of what they are doing, not just before you talk to them the first time so you get a sense, but also ongoing. To give them specific changes to make, you want to have them tracking to see how they are doing, if they are complying with them, and also how much they are improving.

Finally this is an assessment called the ready and willing assessment. Have you ever worked with somebody or talked to a relative where they say, 'oh, I just can't stand this particular ache or pain, I just want to get rid of it'. You say, 'oh, I had that kind of situation before. I know somebody who got really good relief from giving up gluten', or 'they did really good by taking these particular herbs.' Then they go, 'I can't do that,' 'I could never give up gluten' 'I could never give up sugar', 'I could never...' 'You know how you hear people say 'I could never...' That is part of their ready and willing assessment.

When you have somebody who has come to you and asks for help it does not mean that they are necessarily ready and willing to do everything you tell them to do. Yes, we get those people. Yes, I adore those people and I have an awesome time working with those people because they get results and they get results quickly. But there are others where there are things getting in the way and that is just part of what you will be doing with people. It is not just to tell them what to do, it is to inspire and motivate them with what to do but also to understand what is getting in the way and helping to remove some of those blocks. If you do not like to do the emotional coaching kind of work, make an arrangement with somebody you know that does.

On our next video we are going to look at each of these assessments, each of these components of a thorough history. We will look at them in detail. I will show you examples of some of the forms. I will talk to you about the kinds of questions you might want to be asking people in your interview and really shape your history taking. There is a lot to this. You are not going to learn it overnight. It is going to take practice and repetition. You will customize it after a while but at first you will just kind of just follow along and it will get better and better. You will get better and better. The questions will just start flowing off of your tongue. You will not have to look at scripts anymore but it is really great when you start out and you are doing it on the phone because you can have all of your scripts in front of you and you can use cheat sheets and nobody gets to see it. You get to ask them and really wow them with your wonderful expertise at flying the questions off. It will come to you. You can pause now and get ready to go onto the next video where you can learn the specifics of each individual component.