

	<b>PERKHIDMATAN UTAMA PRASISWAZAH</b>
	<b>PEJABAT TIMBALAN NAIB CANSOLOR (AKADEMIK DAN ANTARABANGSA) Kod Dokumen: PU/PS/BR47/PEP</b>

  

<b>END-OF POSTING EXAMINATION PSYCHIATRY POSTING HISTORY TAKING</b>
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Group : \_\_\_\_\_

Student's Name : \_\_\_\_\_

Matric No. : \_\_\_\_\_

Date : \_\_\_\_\_

1. Soft Skills [20 marks]		Absent (0 mark)	Limited (1 mark)	Present (2 mark)
<ul style="list-style-type: none"> <li>▪ Verbal</li> </ul>	<input type="radio"/> Establish rapport	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/> Assure confidentiality	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/> Professionalism	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/> Non-judgmental approach	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/> Show empathy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/> Show respect	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/> Actively listening & interacting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<ul style="list-style-type: none"> <li>▪ Non-Verbal</li> </ul>	<input type="radio"/> Eye Contact	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/> Facial expression	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/> Posture and gestures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Soft Skills Total :</b>				/ 20

2. Interview Content [20 marks]		Poor (0 mark)	Satisfactory (1 marks)	Good (2 marks)
<ul style="list-style-type: none"> <li>▪ Introduction and ending interview</li> </ul>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<ul style="list-style-type: none"> <li>▪ Organization of interview</li> </ul>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<ul style="list-style-type: none"> <li>▪ Style of questioning</li> </ul>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<ul style="list-style-type: none"> <li>▪ Eliciting psychopathology</li> </ul>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<ul style="list-style-type: none"> <li>▪ Risk Assessment</li> </ul>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
		Score : (     ) x 2 weightage		
<b>Interview Content Total :</b>				/20

<b>3. Global Impression [10 marks]</b> ▪ Ability to take history & professional conduct	Poor	Satisfactory	Good	/10
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<b>TOTAL MARKS :</b>	<b>/50</b>
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Remarks:

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**Sign:** \_\_\_\_\_

**Examiner:** \_\_\_\_\_

## Introductory Psychiatry SPK 3961

### History Taking Marking Guide

Soft Skills		Absent	Limited	Present
Verbal	○ Establish rapport	Unable to form any meaningful rapport and made the patient agitated	Attempted to achieve meaningful rapport <b>BUT</b> failed to make the patient feel at ease	Able to establish good rapport <b>AND</b> made patient feel at ease throughout the interview
	○ Assure confidentiality	Did not assure confidentiality of the interview	Did not clearly assure confidentiality of the interview	Assured confidentiality of the interview
	○ Professionalism	Inappropriate questioning and making uncalled comments	Sometimes made mildly inappropriate questioning	Demonstrated professional attitude and behaviour
	○ Non-judgmental approach	Derogate and belittle the patient	At times, appeared to be critical towards some statements made by the patient	Non-judgmental towards the patient
	○ Show empathy	Failed to acknowledge the emotions of the patient	At times, failed to acknowledge the emotions of the patient	Acknowledged and responded to the emotions of the patient
	○ Show respect	Failed to respect certain sensitivities such as religion, culture, race etc.	At times, did not recognise certain sensitivities such as religion, culture, race etc.	Respected all sensitivities such as religion, culture, race etc.
	○ Actively listening & interacting	Failed to identify and ignored cues given by the patient	At times, missed cues given by the patient	Actively listening and interact with the patient
Non-verbal	○ Eye contact	Poor eye contact	Sometimes, did not make eye contact when patient was talking	Good eye contact throughout interview
	○ Facial expression	Inappropriate facial expression during interview (e.g. giggle when patient talks about death)	At times, facial expression was lacking (e.g. no facial expression to patient's cues)	Appropriate facial expression throughout the interview
	○ Posture and gestures	Inappropriate posture (e.g. slouching / closed-posture) <b>AND</b> inappropriate gestures (e.g. exaggerated hand gestures)	Either posture <b>OR</b> gestures were inappropriate	Attentive posture and appropriate hand gestures throughout interview

Interview Content	Poor	Satisfactory	Good
<ul style="list-style-type: none"> <li>Introduction and ending interview</li> </ul>	Did <u>not</u> introduce self and <u>did not</u> end the interview	Introduced self and thanked the patient at the end of the interview	Clear introduction of self, purpose of the interview, and thanked the patient at the end of the interview
<ul style="list-style-type: none"> <li>Organization of interview</li> </ul>	Haphazard history taking	Satisfactory flow of interview	Good flow of interview and clear timeline of events
<ul style="list-style-type: none"> <li>Style of questioning</li> </ul>	Too many close-ended leading questions, interrogative demeanour, or use of medical jargon	Mixture of open-ended questions and closed-ended questions	Good balance of appropriate open and close-ended questions with soothing demeanour
<ul style="list-style-type: none"> <li>Eliciting psychopathology</li> </ul>	Wrong way of eliciting psychopathology expected in the patient	Appropriate questions to elicit most psychopathology expected in the patient	Appropriate questions to elicit and explore almost all psychopathology expected in the patient
<ul style="list-style-type: none"> <li>Risk assessment</li> </ul>	Did not assess or clarify suicidal or homicidal risk	Assessed and clarified suicidal or homicidal risk in the patient	Clear and thorough assessment of suicidal or homicidal risk in the patient
Global Impression	Poor [ 1 – 3 marks]	Satisfactory [ 4 – 7 marks]	Good [ 8 – 10 marks]
<ul style="list-style-type: none"> <li>Ability to take history &amp; professional conduct</li> </ul>	Overall, did not demonstrate the ability to obtain psychiatric history and conduct was unprofessional	Overall, demonstrated the ability to obtain satisfactory psychiatric history and displayed professional conduct	Overall, demonstrated the ability to obtain psychiatric history competently and displayed good professional conduct