

## The Components of the Social History

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**Term:** 2010

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This 4-phase educational module can be offered either within a cultural competency curriculum, gastroenterology sequence, or a physical diagnosis curriculum. This case has been used for the past 3 years as part of a 2nd year clinical foundations course in undergraduate medical education. The overall objective of the case is to demonstrate the importance of social history taking skills within the clinical context. Moreover, it emphasizes the important aspects of culture for both patients and physicians. This case also allows students to work through a case in a small group setting, which allows faculty to better assess student's diagnostic ability as well as their ability to understand the critical nature of a patient's history in obtaining the correct diagnosis. Finally, this case exposes students to culturally specific terms, traditions and manifestations of illness.

During this case, students work to define the concept of "culture" and how it can be ascertained during the social history. However, more importantly we encourage students to be confronted with the reality of the importance of culture in the patient-physician interaction. This session concentrates on key areas of the medical history and more specifically the social history, how culture can shape the differential diagnosis, and the importance culture has in the patient's perception of their illness.

**Instructor:** Monica L. Lyson, M.D.

**dScribe:** Greg Grossmeier

**Course Structure:** Lecture and Small Group Discussion

**NLM Citation:** Lyson M , Perlman R, Lash R, Silveria M, Johnson C, The Social History...It's About the Patient - Culture and All. MedEdPORTAL; 2009. Available from: <http://services.aamc.org/30/mededportal/servlet/s/segment/mededportal/?subid=3149>  
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Keywords:

### Learning Objectives

Using this course, students will learn:

- Communication, interaction, and interviewing skills.
- Identify questions about health practices and beliefs that might be important in a specific local community.
- Elicit a culture, social, and medical history, including a patient's health beliefs and model of their illness.
- Gain knowledge, respect, and validation of differing values, cultures, and beliefs, including sexual orientation, gender, age, race, ethnicity, and class.
- Recognize and manage the impact of bias, class, and power on the clinical encounter.
- Demonstrate respect for a patient's cultural and health beliefs.

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### Reading List

JE. Carrillo; AR Green; and JR. Betancourt, MD. "Cross-Cultural Primary Care: A Patient-Based Approach". *Annals of Internal Medicine*. 1999;130(10):829-834



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## About The Instructor

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### Monica Lypson, M.D.



Dr. Lypson is the Assistant Dean for Graduate Medical Education at the University of Michigan School of Medicine. Throughout her career, Dr. Lypson has focused on medical education. She has worked with the National Board of Medical Examiners and the Accreditation Council on Graduate Medical Education and has served on numerous committees that have allowed her to explore medical education at local, regional and national levels. She uses this expertise to monitor the accreditation status and educational quality of our residency programs.

Dr. Lypson's research interests include resident assessment, historical and contemporary trends in medical education, academic leadership and the under representation of minorities in academic medicine. Several of her invited presentations and papers have focused on clinical performance assessment of medical students and residents and on recruiting minority faculty.

Dr. Lypson also plays a role in our medical school curriculum as the faculty director of the Multicultural curriculum and core faculty for the Family Centered Experience and Longitudinal Cases. [more...](#)

<http://www.med.umich.edu/Medschool/dean/deans/lypson.htm>

- Case Western Reserve University, M.D.
- Brown University, B.S.

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