

**GUIDES FOR HISTORY  
TAKING AND  
CLINICAL EXAMINATION  
OF PSYCHIATRIC CASES**

Published @ 2017 Trieste Publishing Pty Ltd

ISBN 9780649402564

Guides for History Taking and Clinical Examination of Psychiatric Cases by George H. Kirby

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Edited by Trieste Publishing Pty Ltd.  
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**GEORGE H. KIRBY**

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PSYCHIATRIC CASES**

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**PUBLISHED BY  
THE NEW YORK STATE HOSPITAL COMMISSION  
ALBANY, N. Y.**

**UTICA, N. Y.  
STATE HOSPITALS PRESS  
1921**

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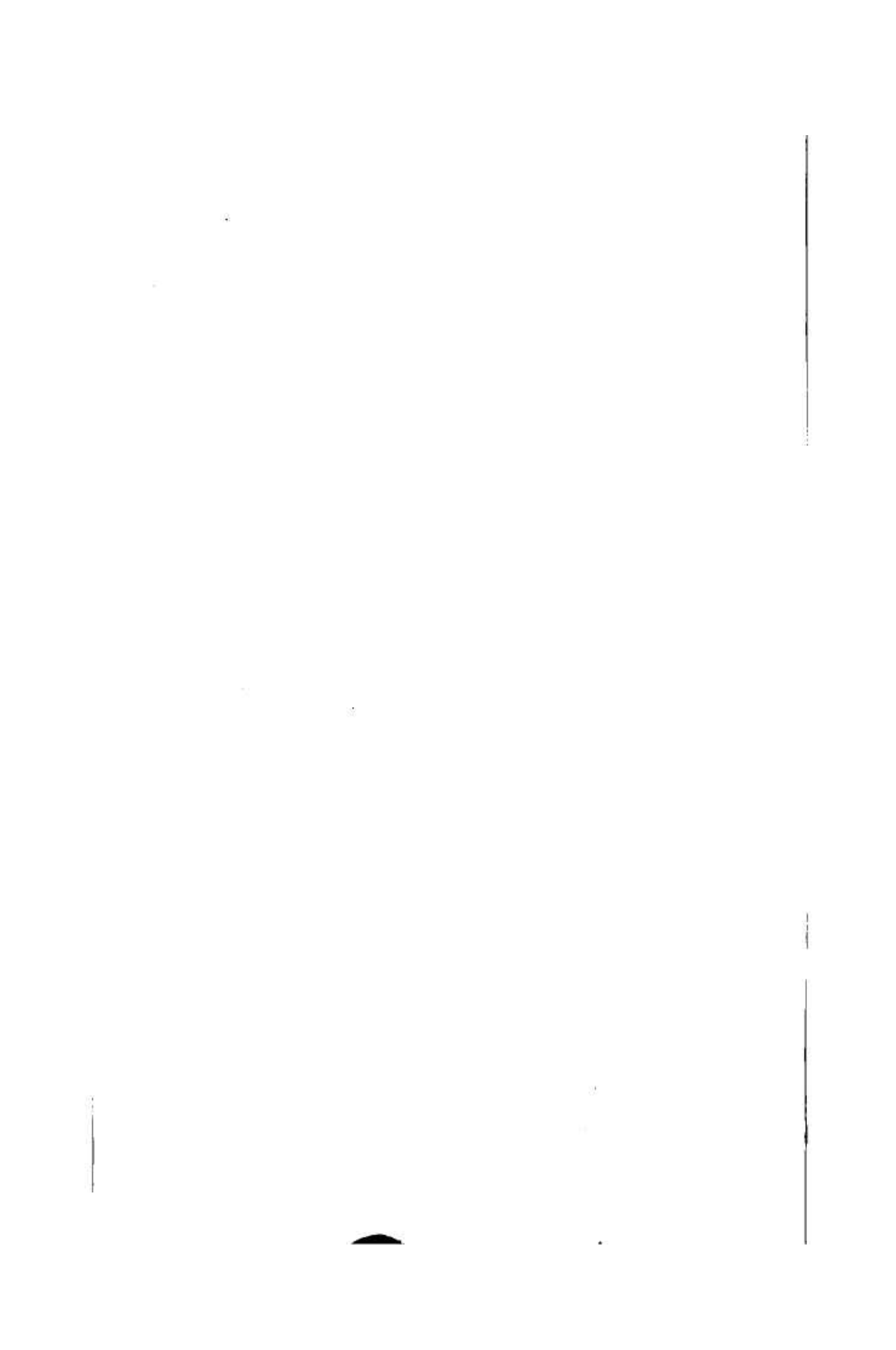
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## PREFACE

Over fifteen years ago Dr. Adolf Meyer, then Director of the Psychiatric Institute, prepared a set of clinical guides or outlines for use in the New York State Hospitals. These were furnished the physicians in typewritten form. Their practical value was quickly recognized with the result that they were adopted as the standard method of clinical study, not only in the New York State Hospitals, but in many other institutions throughout the country. A number of changes and additions to the guides have been made with the passage of time and the advance of psychiatric knowledge, but there has been no departure from the general plan originally formulated by Dr. Meyer for history taking and clinical examination of mental cases.

There has long been a demand that the guides be made available for use in permanent printed form. The decision of the State Hospital Commission to publish the guides gave the editor an opportunity to revise and amplify them in several directions and to add considerable new material which has been accumulated as the result of the experience of recent years.

The guide for the study of the personality make-up is based on the well known work of Hoch and Amsden and follows in a general way the outline prepared by Dr. Hoch for use in the State Hospitals while he was Director of the Institute.

Dr. Clarence O. Cheney, Assistant Director of the Institute helped materially in the revision, and the guide for the study of body development and the endocrine glands is almost entirely his work. Dr. Charles E. Gibbs of the Institute Staff assisted in revising the anamnesis guide.

From various physicians in the New York State service helpful suggestions have been received. The Editor wishes to acknowledge particularly the assistance rendered by Dr. George W. Mills, Clinical Director of the Central Islip State Hospital, and Dr. Mortimer W. Raynor, Clinical Director of the Manhattan State Hospital.

October 1, 1921.

G. H. K.

## I

### THE USE OF GUIDES IN CLINICAL PSYCHIATRY

The necessity of following some kind of a plan or method of case-study in psychiatric work is universally recognized. Physicians taking up psychiatry should, therefore, first of all, try to perfect themselves in the art of history taking and strive to develop a good technique for the examination of mental patients. Facility and skill in these directions will be acquired slowly and only after painstaking effort. Method and technique are certainly just as important in psychiatry as in any branch of internal medicine or clinical diagnosis.

Owing to the variety and complexity of the situations dealt with in the investigation of life histories and the difficulties encountered in the examination of many types of mental disorder, the physician who approaches a case without a definite plan in mind is certain to overlook important facts or permit the patient to lead too much in the examination, often with the result that the time is not spent to the best advantage.

One of the chief obstacles in developing a satisfactory scheme has lain in the difficulty of devising guides that would meet the requirements of the widely differing types of cases without at the same time becoming too cumbersome and involved for practical clinical application. Furthermore, the kind of guidance needed by one beginning psychiatric work is quite different from that required by an experienced clinician. One unfamiliar with the guides presented in the following pages will perhaps at first feel that they are too elaborate and go too much into detail; especially is this likely to be the reaction of one who must examine fairly rapidly a large number of cases, a situation which, unfortunately, often confronts physicians in state hospitals. The fact that work must sometimes be done

under conditions unfavorable for the best and most satisfactory results furnishes no valid reason for objection to a method which aims at a higher level of thoroughness and completeness.

The guides present in some detail the various topics which it is essential to keep in mind if cases are to be carefully and adequately studied. It is not expected that one would, even under ideal conditions, undertake to follow out in every case every line of inquiry suggested in the various guides. The guides contain a good deal of information and various tests which should be available when needed. One's experience and judgment must decide how far it is desirable or necessary to push the examination in this or that direction. Thorough familiarity with the guides and the general plan of study outlined will give the physician a solid foundation on which to develop good psychiatric technique and clinical skill, will make the daily work more interesting and valuable, and will qualify him to make special clinical studies and investigations as opportunities arise.