Critical Thinking and Decision Making
Figure 16-1  The traditional approach to reaching a diagnosis includes interviewing the patient in the controlled environment of a clinic or office.
**Figure 16-2** The traditional approach to diagnosis in medicine.

**TRADITIONAL APPROACH TO DIAGNOSIS IN MEDICINE**

Patient assessment (history, physical exam, vital signs, tests)

List of possible causes/diagnoses (differential diagnosis)

Further evaluation

Consider results of evaluation

Narrow the list (may have to consider additional possibilities before reaching a diagnosis)
Figure 16-3  The emergency physician assesses patients in the busy, hectic atmosphere of an emergency department. © Edward T. Dickinson
Figure 16-4  The emergency medicine approach to reaching a diagnosis.

**EMERGENCY MEDICINE APPROACH TO DIAGNOSIS**

Primary assessment to find and treat immediate threats to life

Patient assessment (history, physical exam, vital signs, tests) with special attention to looking for red flags

Consider the most serious conditions associated with the patient’s presentation and rule them in or out (rule out the worst case scenario)

List of possible causes/diagnoses (differential diagnosis)

Further evaluation in light of time and resources available in the ED

Consider results of evaluation

Narrow the list (may have to re-state the chief complaint as the diagnosis)
Figure 16-5  The EMT assesses a patient in the uncontrolled environment of the field. © Mark C. Ide
Figure 16-6  The EMS approach to reaching a diagnosis.

EMS APPROACH TO DIAGNOSIS

Primary assessment to find and treat immediate threats to life

Patient assessment (history, physical exam, vital signs, tests) with special attention to looking for red flags
Simultaneously, the EMT begins treatment that may be beneficial and is not harmful, e.g., oxygen

Consider the most serious conditions associated with the patient's presentation that can be treated in the field and rule them in or out

List of possible causes/diagnoses (differential diagnosis) if time allows

Further evaluation in light of limited time available and restricted resources present in the field

Consider results of evaluation

Narrow the list (may have to re-state the chief complaint as the diagnosis)
Table 16-1  Approaches to Reaching a Diagnosis

<table>
<thead>
<tr>
<th>TRADITIONAL APPROACH</th>
<th>EMERGENCY MEDICINE APPROACH</th>
<th>EMS APPROACH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal</td>
<td>Reach definitive diagnosis and institute treatment</td>
<td>Rule out life-threatening conditions, narrow range of possible diagnoses, and institute urgent treatment</td>
</tr>
<tr>
<td>Pace</td>
<td>Leisurely</td>
<td>Efficient</td>
</tr>
<tr>
<td>Thoroughness</td>
<td>Very thorough</td>
<td>Focused</td>
</tr>
<tr>
<td>Assessment Tools and Tests</td>
<td>Wide range of tests patient can be sent for</td>
<td>Limited to pertinent tests that are available at the time of the patient’s presentation</td>
</tr>
<tr>
<td>Extent of Patient Rapport</td>
<td>Significant</td>
<td>Limited</td>
</tr>
<tr>
<td>Range of Possible Diagnoses</td>
<td>Extensive</td>
<td>Moderate</td>
</tr>
</tbody>
</table>