

Giving Time to the Patient: The Key for Proper Diagnosis

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A doctor is a person trusted by the suffering people irrespective of age, sex, religion etc. The patient comes to the doctor with great faith and confidence. All secrets are disclosed to the doctor about his/her sufferings, personal behaviours, weaknesses etc. Any violation of the confidentiality and trust of the patient by the doctor may result in loss of trust and even harm to the patient.

A patient, when visits the doctor with some complains of suffering, the prime duty of the doctor becomes to diagnose the disease properly which should be followed by giving advice of medicine, diet, regimen etc. If, due to any factor, the doctor fails to diagnose the condition properly then the whole effort may prove to be in vain.

The first, foremost and important step in the direction of diagnosis is taking the history of the sufferings of the patient step by step. Listening and analysis of the statement of the patient by giving time is of prime importance. A successful doctor always follow this principle seriously.

Here an experience of the author is shared with the learned readers.

The author is a professor and Ayurvedic practitioner. Before about 3 months, a lady of age around 32 years visited to the clinic with pain on the right side of the chest since 15 days. By appearance she is of thin built, average height and weight lady with hardly average nutrition. She lives with her husband of age approximately 40 years who is a Grade IV employee of an educational institution and a girl child of 6 years age studying in a nearby school. Recently she started to work in an educational institution where her duty hour is 10.00 A.M to 4.00 P.M. Her duty is to look after an academic department of the institution in every aspect starting from cleaning to arrangement of officer's chamber and classroom. She is menstruating at a cycle of 28-30 days, period 4-5 days and normal quantity of bleeding. As per statement her appetite is not proper and stool habit is passing of hard and less quantity. No complain is narrated in relation to urine. In relation to sleep she stated that, since the onset of the chest pain she has been suffering from sleep disturbance.

Before the present visit the patient visited to 3 doctors and they advised her to take some medicines. When the indications of the prescribed medicines were checked it was observed that, all are related with hepato-biliary system. She was ultimately advised to do Ultra Sonography of the Whole abdomen. From the medicines and investigations advised by the previous consultants it was assumed that she was considered to be a patient of Gall Bladder related diseases.

After taking the thorough history the patient was examined and the below mentioned were the findings

- Pulse – 84 / minute
- B.P – 120/82 mm Hg
- H.B – 78/minute

Tenderness elicited on deep palpation of the abdomen over the umbilical region.

No tenderness was demonstrated on palpation of the upper abdomen.

At the 1st round of examination difficulty to reach at a satisfactory diagnosis persisted.

Hence, an effort to exclude the involvement of the chest muscles was made now.

The patient's neck movements, hand movements and body movement of the parts above the waist were studied and observed that, she feels pain at a point of the chest during the flexion and extension of the neck and abduction of the hands at shoulder joints.

Now when the patient was instructed to point the painful area she put her finger on a point on the right side of the chest at the 3rd intercostal space approximately 4 inch medial to the mid axillary line (right).

Diagnosis and treatment: Finally, the patient was diagnosed as of muscle spasm and one analgesic and one antacid was advised. She was advised to report after 3 days.

Follow up report: On the 3rd day of the 1st visit the patient informed marked relief telephonically and was advised to take the same medicines for 2 days more. On the 5th day the patient met the doctor and reported 100% relief of her previous complaints. All movements of the neck and hands were free and painless.

She was advised to stop medicines and advised to not to lift weight and travel by two-wheeler for a period of 15 days.

Till today the patient has not reported any suffering. Hence it is assumed that, the treatment was successful.

In the described case it can be assumed that the previous consultants were misled by the complain of the patient as such type of pain is commonly experienced due to gall bladder pathology. Failure of the previous treatments gave a lead to the author to think the condition to be of any other pathology and by giving more time in examination the actual cause was detected.

The experience proves the need of giving time with the patient to reach at proper diagnosis which is the key of success in treatment.

Hence it is appealed to the doctors to devote time with the patients to give them proper service.