

# Screening template

## 1. Health seeking question:

- What is your complaint: \_\_\_\_\_
- What are your goals with therapy: \_\_\_\_\_
- What are your expectations: \_\_\_\_\_

## 2. General red flags:

- General malaise
- Unexplained fever
- Unexplained weight loss (>5kg in 2 weeks)
- Cancer in history
- Prolonged use of corticosteroids
- Trauma in history
- Night pain
- Widespread changes of sensation in arms and legs, dizziness, problems with balance or vision

## 3. Specific red flags (knee joint):

- Fracture:
  - Trauma
  - Severe pain at rest and pain at night
  - Inability to weight-bear
  - Positive Pittsburgh Decision Rule
  - Positive Ottawa Knee Rule
- Post-traumatic neurovascular damage involving 2 or more ligaments:
  - Hematoma
  - Groove at lateral or medial joint line
  - Markedly visible and palpable deformity
  - Damage to the n. Peroneus communis, n. Tibialis, a. Tibialis posterior and/or a. Dorsalis pedis
- Complete rupture of the extensor group:
  - Inability to lift the extended leg
  - Palpable groove in the quadriceps muscle
  - Difference in level of the two patellae
  - Inability to bear weight on the leg
- Monoarthritis:
  - General malaise
  - Swelling of the entire joint
  - Redness of the joint
  - Local increase in temperature
  - Decrease in range of motion (ROM)
- Spontaneous hemarthrosis: This is mainly a risk in people who have disorders such as hemophilia or those who use anticoagulents
- Bone or soft tissue tumor:
  - Mild alternating pain for weeks
  - Palpable mass at the end of long bones
  - Swelling of soft tissues

- Growth in a lesion/swelling that's been existing for a longer period
- Swelling below the muscle fascia
- Swelling at a site distant to the site of trauma

Feel free to adapt this section with specific red flags per joint so you can use this in your own practice. You will learn more about specific red flags in the upcoming units.

#### 4. Tract anamnesis:

- Cardiovascular tract:
  - Pressure on the chest
  - Shortness of breath during exertion
  - Swollen ankles
  - Cardiovascular risk factors like high blood pressure, hyperlipidemia etc.
- Respiratory tract:
  - Cough with discolored sputum
  - Shortness of breath
  - Pain during breathing
  - History of asthma, bronchitis or COPD?
- Digestive tract:
  - Difficulties with swallowing
  - Nausea or stomach ache
  - Changes in defecation
  - Increase in complaints after (fatty) meals
- Urogenital tract:
  - Pain with urination
  - Discolored urine, blood in urine
  - Incontinence
  - Changes in menstruation
  - Sexual problems
- Locomotor tract:
  - Pain in multiple joints
  - Swelling in multiple joints
  - History of rheumatic disease

#### 5. Course: Is the course of the patient's complaints normal or abnormal?

- No increase in activity
- No increase in participation
- No decrease in pain
- No explanations for abnormal course due to absence of negative prognostic factors

#### 6. Movement-dependance: Can the patient's complaint be influenced by movement?

- No aggravating or easing movements/activities
- 24h constant pain
- Pain at night

**Screening decision:**

- Absence of pattern for serious pathology (step 1-6) → Continue patient history**
- Presence of pattern for serious pathology → Refer to GP / specialist**