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 mailaise		
	\square Unexplained fever		
	☐ Unexplained weight loss (>5kg in 2 weeks)		
	☐ Cancer in history		
	\square Prolonged use of corticosteroids		
	☐ Trauma in history		
	☐ Night pain		
	\square 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		
	O Positive Pittsburgh Decision Rule		
	O Positive Ottawa Knee Rule		
	\square Post-traumatic neurovascular damage involving 2 or more ligaments:		
	○ Hematoma		
	○ Groove at lateral or medial joint line		
	Markedly visible and palpable deformity		
	ODamage to the n. Peroneus communis, n. Tibialis, a. Tibialis posterior and/or a. Dorsalis		
	pedis		
	☐ Complete rupture of the extensor group:		
	O Inability to lift the extended leg		
	O Palpable groove in the quadriceps muscle		
	O Difference in level of the two patellae		
	O Inability to bear weight on the leg		
	☐ Monoarthritis:		
	O General malaise		
	O Swelling of the entire joint		
	O Redness of the joint		
	O Local increase in temperature		
	O Decrease in range of motion (ROM)		
	☐ Spontaneous hemartrhosis: This is mainly a risk in people who have disorders such as		
	hemophilia or those who use anticoagulents		
	☐ Bone or soft tissue tumor:		
	O Mild alternating pain for weeks		
	O Palpable mass at the end of long bones		
	○ Swelling of soft tissues		

(○ Swelling below the muscle fascia
(○ Swelling at a site distant to the site of trauma
Feel free to adapt th	nis section with specific red flags per joint so you can use this in your own practice.
	about specific red flags in the upcoming units.
4. Tract ana	ımnesis:
☐ Card	iovascular tract:
(○ Pressure on the chest
(○ Shortness of breath during exertion
	○ Swollen ankles
(Cardiovascular risk factors like high blood pressure, hyperlipidemia etc.
	ratory tract:
•	OCough with discolorated sputum
(Shortness of breath
(○ Pain during breathing
(○ History of astma, bronchitis or COPD?
☐ Dige:	stive tract:
(○ Difficulties with swallowing
(O Nausea or stomach ache
(○ Changes in defecation
(O Increase in complaints after (fatty) meals
☐ Urog	enital tract:
(○ Pain with urination
(O Discolorated urine, blood in urine
(○ Incontinence
(○ Changes in menstruation
(○ Sexual problems
☐ Loco	motor tract:
(○ Pain in multiple joints
	○ Swelling in multiple joints
(O History of rheumatic disease
5. Course: I	s 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. Moveme	nt-dependance: Can the patient's complaint be influenced by movement?
	No aggravating or easing movements/activities
	24h constant pain
	Pain at night

 $\ensuremath{\bigcirc}$ Growth in a lesion/swelling that's been existing for a longer period

Screening decision:

$\hfill \Box$ Absence of pattern for serious pathology (step 1-6) → Continue patient history
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 \Box Presence of pattern for serious pathology \Rightarrow Refer to GP / specialist