

# HISTORY

HPC

- Duration symptoms
- Speed of onset: Sudden / Gradual
- Unilateral / Bilateral
- Respiratory symptoms: Wheeze / SOB / Frothy sputum / Haemoptysis
- Chest Pain: Cardiac / Pleuritic
- Joint pain / swelling
- Fevers
- Limb trauma / Fall
- Compartment syndrome risk factors: Trauma / Surgery / Long-lie (on affected side)
- DVT risk factors: Recent surgery / Immobility
- Joint sepsis risk factors: Recent surgery

PMH

- Cardiac: IHD / MI / Heart failure
- PE risk factors: Cancer / Previous DVT / PE
- Liver disease

DH

- Anticoagulation: missed doses
- Diuretics: Missed / reduced dosages
- New medication: CCB (Amlodipine)

SH / FH

- Smoking status: Non / Current / Ex
- Exercise tolerance: Normal / Low
- Joint sepsis risk factor: IVDU

VTE risk factors

- Immobility
- Malignancy
- Previous VTE

# EXAMINATION

GENERAL OBSERVATIONS

- Increased work of breathing
- Distressed

AIRWAY

- Ensure airway patent

BREATHING

- Physical Observation: FiO<sub>2</sub> / RR / SaO<sub>2</sub>
- Auscultation: Wheeze / Crackles / Air entry
- Percussion: Dull
- Sputum: Haemoptysis

CIRCULATION

- Physical Observation: HR / BP
- Fluid input-output: Fluid balance
- Heart sounds: Murmurs
- JVP: Not visible / <2cm / Raised
- Calves: SNT / Erythema / Painful
- Peripheries: Unilateral swelling / Bilateral swelling / Pitting oedema / Sacral oedema

DISABILITY

- Physical Observation: Temp
- GCS
- Limb movement: Able to move / Unable / Pain on passive

EXPOSURE

- Limb: Erythema / Warmth / Cellulitis / Skin ulceration / Deformity
- Joint: Swelling / Erythema / Warm / Painful
- Abdo: Ascites

# INVESTIGATIONS

BLOODS

- FBC / U&E / CRP
- Troponin: If Chest pain
- D-Dimer: If suspected DVT and WELLS >2
- BNP

CXR

- Consolidation
- Effusion
- Pulmonary oedema

SKELETAL X-RAY

- Fracture
- Dislocation
- Bone lesion
- Degenerative changes

ECG

- Rate
- Rhythm: Arrhythmia
- Ischaemia: ST segment / T wave inversion / New LBBB
- Right heart strain: Right Axis / S1Q3T3

DOPPLER

- +ve D-Dimer
- WELLS score ≥ 3
- DVT

JOINT ASPIRATION

- Organisms / Culture / PCR
- Crystals

DISCUSS WITH SENIOR

HEART FAILURE

DVT

SEPTIC JOINT

COMPARTMENT SYNDROME

LYMPHOEDEMA

CELLULITIS

MUSCULOSKELETAL INJURY / LESION

DEPENDENT OEDEMA