Leg Swelling

Introduce yourself , take permission

Patient profile (name , age , occupation , marital status, address)

Chief complaint + duration

Analysis of the Chief Complaint

Site
a) Extent of swelling
b) Unilateral or bilateral, Other sites: Periorbital? Abdomen? Genitalia? Back? Hands?
Onset (sudden or gradual)
Do they progress with activity or throughout the day? Or with lying down?
Character (with)
a) Redness
b) Hotness
c) Tenderness
d) itching
Associated symptoms (finish the CC analysis then ask about them ↓)
Exacerbating, Relieving.
Severity: loss of the limb function.

Associated symptoms

I. Unilateral Swelling
a) **DVT**:
Limb → Redness, Hotness, Tenderness
PE Symptoms → Chest pain, SOB, Hemoptysis.
Risk factors → recent travel, surgery, immobility, pregnancy, OCP, previous DVTs.
b) **Cellulitis** → Fever & Chills, Brown areas, Rapid progression, Ulcers.
c) **Venous Obstruction:** HX of pelvic tumor, AV fistula.
d) **Trauma**.
e) **Joint disease:** Pain, hotness, redness, skin rash, decreased range of movement.

II. Bilateral Swelling
a) **HF** → Cough, Orthopnea, PND.
b) **Liver cirrhosis** → Bleeding tendency, Abdominal distention.
c) **Renal failure** → Frequency, Nocturia, Urine (color/smell/ amount)
d) **Hypoproteinemia** → Nutrition, Malabsorption
e) **Hypothyroidism** → Weight gain, Cold intolerance, Lethargy and Fatigue

Review of systems

Past medical and surgical
Chronic illnesses (DM, HTN, Hyperlipidemia) , Allergy
Past surgeries and admissions.

Drug Hx NSAIDs, steroids, Ca+2 Ch. Blockers (Nifedipine, Amlodipine)

Family Hx Ask about relevant conditions related to the history (thrombophilia , cancers)

Social Hx: Smoking history (# of pack years), alcohol, travel history

****Investigations:**

1. **Doppler U/S and D-dimer → DVT**
2. **Liver function test (LFT) → Liver cirrhosis**
3. **Kidney function test (KFT) → Renal failure**
4. **Thyroid function test (TFT) → Hypothyroidism**
5. **CBC → Cellulitis**