



# What to expect during your clinical assessment

Regular assessment is essential as changes to your general health and other circumstances over time may mean your treatment needs to be changed. Here we explain why assessment is important and what you should expect during your check up.



**F**or any health-related concern you may have, seeing a healthcare professional for a full assessment and diagnosis is essential to make sure you identify the cause of the issue, and how best to treat it. For example, if you have a problem with your lower limbs such as swelling, skin changes, or ulceration, an assessment by a clinician is important to make sure the underlying cause of the problem is identified so you can ensure you are getting the right treatment for your condition.

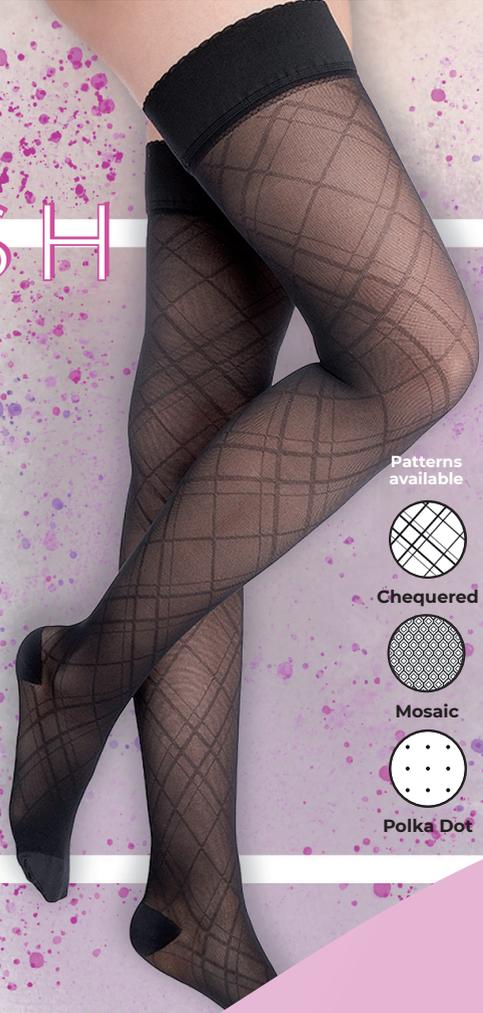
Once you are being treated, it is still crucial to keep up with follow-up appointments. This is so that any changes in your general health or circumstances that could affect your limbs can be identified and managed appropriately. Conditions such as venous leg ulceration and lymphoedema are long-term conditions that can improve or deteriorate over time so it is important to seek help and advice regularly so your treatment can be changed if needed. In all cases, the sooner the correct

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treatment is started, the more likely it is that your limb health will improve. Alternatively, ignoring the problem could lead to it worsening with time, making it severe and harder to manage in the long run. Continuing a treatment that is no longer suitable because of changes in your general health can be ineffective, or worse, result in harm.

Regular reassessment is important as continuing a treatment that is no longer suitable because of changes in your general health can be ineffective, or worse, result in harm.

the things you will be asked about:

- Your medical history including previous limb surgery/trauma, medical conditions, family history, medication history and pregnancies (if female). These are

all known risk factors for developing lymphoedema or venous disease

- Your lifestyle choices such as smoking, diet, exercise or if you use drugs intravenously. These factors can contribute to swelling and the development of wounds, and can contribute to slower healing
- Presenting symptoms such as pain or swelling. Your healthcare professional will want to know what concerns you most and why you have sought help
- How agile and mobile you are, as this may influence what treatment you are given
- Previous treatment and outcomes. For example, if you have previously used compression bandaging and disliked it, your healthcare professional can present you with different options to consider instead.

## Assessment

Your healthcare professional should perform a thorough assessment. If it is a first consultation, or an annual review, this may take longer than a usual appointment.

Your assessment should consist of three parts: an assessment of you and your medical history; an assessment of your legs, and finally, your wound (if you have one). Here we explain what you can expect at each of these stages and why they are carried out.

## Your medical history

The aim of this part of the assessment is to help the clinician to identify any factors that put you at risk of, or could contribute to, the development of a lower limb problem. It will also aim to determine the impact that the issue has on you and your everyday life, your ability and desire to care for yourself, or the type of support you may need. Here are some of

## Leg assessment

The leg assessment aims to identify if you can undergo compression therapy, which is key in the management of most lower-limb conditions caused by venous and lymphatic disease. Before compression is used, your clinician will

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need to carry out an assessment of the arterial circulation in your legs. If you have a problem with your arteries, known as peripheral arterial disease, the blood flow to your legs is restricted and using compression could reduce it further.

Your healthcare professional will check for arterial disease by performing a vascular assessment. To do this, the blood pressure is taken in both of your arms and then on both ankles. Sometimes this test will be fully automated, and you will have blood pressure cuffs on both arms and legs at the same time. A Doppler machine may be used to listen to the blood running through your arteries. Both types of tests compare the blood pressure in your arm with the blood pressure in your legs. If the results show there is a problem with your arteries, it may be unsafe to use compression.

A visual assessment will also be made of both legs, looking for the signs of venous and arterial disease. Signs of venous disease include:

- Hardening of the tissues under the skin (lipodermatosclerosis) due to long-term inflammation and as a result of venous blood failing to return efficiently through the veins
- Swelling of the legs or ankles due to poor venous return and fluid collecting in the ankle area
- Varicose veins, itching of the skin, brown staining around the ankle, white areas on the skin (atrophie blanche) and tiny dilated blood vessels in the arch of the foot (ankle flare) are all symptoms of venous blood pooling in the ankle area and not being efficiently returned through the veins.

Visual signs that there is a narrowing or blockage of the arteries that supply



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Smith & Nephew, Crowley Park, Building 5, Hatters Lane, Watford, Hertfordshire WD18 8YE, T +44 (0)1923 477100, F +44 (0)1923 477101  
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the leg (arterial disease) include:

- Cold, shiny, hairless legs
- Muscle wasting in the calf and/or thigh
- Toenail changes (e.g. thickening, brittleness and slow growing).

Your healthcare professional may ask you if you would like to participate in your own care in any way. Not everyone wants to do this or are able to, but if you are keen to carry out some or all of your own care, a plan can be put in place.

some or all of your own care, a plan can be put in place to help with this, such as using compression that encourages independence, e.g. a wrap system.

You should also be asked about how having a leg ulcer impacts on you, for

The size and shape of the legs will also be evaluated as this can help to guide the choice of compression therapy used.

### Your wound

The final part of the assessment will be the wound (if you have one) and the surrounding skin. This is to identify the cause, shape, size and healing status of your wound to see what dressing can be used and if any medical treatment or further investigation is needed. For example, it is important to recognise if the wound is infected and requires an antimicrobial wound dressing or if the wound contains debris and needs this removing. Some wounds are deeper than others and may need a dressing to fill the cavity before a second dressing is placed over the top.

Your healthcare professional may ask you if you would like to participate in your own care in any way. Not everyone wants to do this or are able to, but if you are keen to carry out

example, if pain prevents you from working or disrupts your sleep.

On completion of all aspects of the assessment your healthcare professional will discuss the findings with you.

The assessment findings may indicate that you need to see a specialist for further investigation.

For example, a vascular specialist nurse or doctor who specialises in veins and arteries may need to undertake further tests if a problem with your arteries is identified. A dermatology specialist nurses or dermatologist will be able to advise further on skin conditions, such as varicose eczema.

A treatment plan should be developed in partnership with you, so that what matters most to you is addressed. Remember, if any of your circumstances change, or you are worried about a new sign or symptom (e.g. a new or worsening pain or smell), contact your healthcare professional for assessment as soon as possible. 

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