**Bow Legs (Genu Varum)**

**History:**
- Age at presentation
- Associated complaints (limp, pain)
- History of infection, trauma, or fracture to affected limb(s)?
- Risk factors for rickets?
  - Diet (prolonged breast feeding?)
  - Exposure to sun (traditional clothing, skin pigmentation?)
- Family history (very short stature, skeletal dysplasia?)

**Examination:**
- Growth parameters (height below 3rd percentile?)
- Lower extremity exam including rotation profile (internal tibial torsion in toddlers may exaggerate bowed appearance)

**Concern for pathologic varus?**
- Age greater than 2.5 years?
- Unilateral deformity?
- Associated symptoms (limp, pain)?
- History of infection, trauma, or fracture to affected limb(s)?

**Likely physiologic genu varum**
- Reassurance as physiologic angulation is typically self-limited with improvement or resolution occurring in most children without intervention
- Consider referral to Paediatric Orthopaedics if findings are progressively worsening

**Screening labs for Vit D deficiency rickets indicated?**
- i.e. nil local trauma, fracture, or infection

**Obtain screening labs:**
- Vitamin D level, Ca, Phos

**Screening labs normal?**
- Yes
- No

**Refer to Paediatric Orthopaedics**

**Refer to Paediatric Medical**

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