Rheumatology iMSK Triage Pathway

Red Flags for Acute Pathway Referral

- Suspected GCA (Giant Cell Arteritis/Temporal Arteritis) – reject to GP for UTC referral

Consider in >50 years with new headache; temporal artery tenderness/thickening; jaw claudication; systemic symptoms; visual or neurological symptoms

- Suspected Septic Joint –reject to GP for UTC referral

Direct to Rheumatology Consultant

- Inflammatory pathology – see Page 2
- Previous Consultant management requesting review
- Second opinion required for patient outside of NW Surrey

Inflammation of One Joint

- **Most common** is Great Toe Gout and should be considered as Primary Care Management unless acute/ difficult
- Investigations: Plain x-ray,FBC/U&E/Urate/CRP

Are there signs of inflammation and +ve blood results?

- **YES** Routine Rheum
- **NO Joint** Specific Pathway

Inflammation of Multiple Joints

Patient with short history of hot, swollen and tender joint(s) with restricted movement should be regarded as Septic Arthritis until proven otherwise

Refer people with persistent synovitis with an unknown cause to a rheumatologist.

- Clinical tips: morning stiffness >30mins
- Positive MCP/MTP squeeze tests
- Associated features of PsA, IBD
- Investigations: FBC/ ESR/ U+E/ LFT/ CRP/ RhF/ CCP/ ANA

Urgent Referral if any of following: small joints of the hand and feet are affected. more than one joint is affected or delay of 3 months or longer

- **YES** Urgent Early Arthritis Clinic
- **NO** Routine Rheum

Inflammation of the Spine

- Age <45
- >3/12 pain
- morning stiffness >1hour
- buttock pain (SI joint)
- Reduced range of spinal movement
- Pain on flexion/rotation of the hips
- Investigation: FBC/LFT/U&E/CRP

ACP Rheumatology Clinic

Widespread Pain

- Widespread pain >3/12; symptoms of fatigue, non-refreshing sleep, cognitive fogging.
- Recommend TSH/ Vit D/ U+E/LFT/ Ca/ FBC Consider ANA – high risk of false positives.

Consider diagnosis in primary care and only accept if diagnostic uncertainty

Have they already been diagnosed with Fibromyalgia?

- **YES** Review Chronic Pain Pathway
- **NO** ACP Rheum