Royal Adelaide Hospital  
Rheumatology Clinical Information Sheet

<table>
<thead>
<tr>
<th>Clinical Condition</th>
<th>Subacute Single or Several Joints</th>
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<tbody>
<tr>
<td>Eligibility</td>
<td>Swelling and pain of a single or several joints over several days-weeks</td>
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<td>Priority</td>
<td><strong>Urgent:</strong> Mon-Fri, 9-5: must be discussed with the rheumatology registrar on call on 08 8222 4000 to obtain appropriate prioritisation and then a referral letter faxed to 08 8222 5895. After hours: medical registrar on call via RAH switchboard 8222 4000</td>
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| Differential Diagnoses   | Oligoarticular synovitis: reactive arthritis, ankylosing spondylitis, recent onset rheumatoid arthritis  
Intercritical Gout  
Osteoarthritis  
Rare: Tumour (Primary or Secondary) |
| Information required with referral | History:  
- Duration of symptoms  
- trauma  
- psoriasis  
- colitis/ileitis  
- GU/GI Infection  
- family history  
- back pain/stiffness  
Exam:  
- synovial swelling  
- joint tenderness  
- other joints (back pain/stiffness)  
Other medical & allied health practitioners the patient has seen concerning this problem |
| Investigations required with referral | Blood: FBC, U&E, LFTs, Ca, uric acid, ESR, CRP, RF, anti-CCP Ab, 
ANA  
- Stool culture  
- Urine PCR for chlamydia  
- XR: affected joint (OA)  
Consider joint aspiration |
| Pre-Referral management strategies (include with referral) | Simple analgesia (paracetamol) |
|                         | NSAID – minimise dose |
|                         | Physiotherapy referral |
| Discharge Criteria/information | Discharge once the problem resolves and/or no long term disease-modifying/immunosuppressive therapy is required.  
**Red flags** that should trigger referral back for review: recurrent joint inflammation |
| Fact sheets | Refer to [www.rheumatology.org.au/community/PatientMedicineInformation.asp](http://www.rheumatology.org.au/community/PatientMedicineInformation.asp) |