* **Take urgent bloods** (see overleaf for advice if transport not immediately available)
* **Initiate treatment** (see overleaf for dose guidance)
* **Contact the Rheumatology registrar** to discuss the referral ***only*** if the patient is under 55 or the symptoms are atypical (RUH switchboard Bleep #7852)
* **Refer patients with visual disturbance for same day Ophthalmology review**
* **Email this form along with a summary of the patients medication and comorbidities** to ruh-tr.RNHRDRheumatologyReferrals@nhs.net

**Patient Details:**

Name:

 Address:

DOB:

MRN/NHS number:

Please provide the best **telephone number** for us to contact the patient and arrange their appointment. We aim to see all referrals within 2 working days\*

**This patient:**

|  |  |  |
| --- | --- | --- |
| is > 55 years old | [ ]  Yes [ ]  No | ** if no discuss with rheumatology registrar** |
| has visual symptoms | [ ]  Yes [ ]  No | ** If yes refer to Eye Clinic for same day review** |
| has jaw claudication | [ ]  Yes [ ]  No |  |
| has scalp tenderness | [ ]  Yes [ ]  No |  |
| has a new headache | [ ]  Yes [ ]  No | Side of headache: [ ]  Left [ ]  Right |
| has PMR-like symptoms | [ ]  Yes [ ]  No |  |
| has systemic upset | [ ]  Yes [ ]  No |  |
| has abnormal temporal arteries  | [ ]  Yes [ ]  No |  |

*(see overleaf for advice on management of atypical cases or if visual symptoms)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Blood results:** | Plasma viscosity: |  | CRP: |  |

**Prednisolone dose initiated:** *(see overleaf for guidance)*

40mg prednisolone [ ]  60mg prednisolone [ ]

**History of complaint:**

**Relevant comorbidities:** *(e.g. diabetes)*

**Versus Arthritis GCA patient information leaflet or similar guidance has been provided:** [ ]

*\*Referrals will be collected between 9am and 5pm Monday- Friday (excluding public holidays). If you have not heard anything after two working days please contact the ward registrar via switchboard.*

**Referral guidance**

**Atypical GCA:** Giant cell arteritis is very rare in patients aged <55 years of age. The risk increases with age. Typical symptoms include a new headache poorly responsive to analgesia, raised inflammatory markers and systemic upset.

Patients aged <55 years or with atypical symptoms must be discussed with rheumatology prior to referral.

**Contact the Rheumatology registrar** via RUH switchboard Bleep #7852 Monday-Friday 9am – 5pm. For urgent advice out of hours please contact medical team.

**Patients with visual disturbance:** If your patient has new visual disturbance speak to the on-call ophthalmologist **immediately** for advice regarding treatment and referral. Do **NOT** refer via this pathway unless specifically instructed to do so by ophthalmology.

*To speak to Dr on-call:*

*8.30-5pm: Telephone Eye Clinic: 01225 824602/ 824616 or via RUH switchboard 01225 428331*

*Out of hours: telephone on-call ophthalmologist via RUH switchboard 01225 428331*

*(Note: Monday-Thursday 8pm-8.30am and Sunday 4pm-Monday 8.30 am on-call is covered by Bristol Eye Hospital).*

**Treatment:** GCA is a medical emergency. All suspected cases should receive treatment without delay.

Guidelines recommend: **60mg prednisolone if complicated e.g. visual disturbance, jaw claudication**

**40mg prednisolone if uncomplicated**

A PPI, calcium / vitamin D and a bisphosphonate should also be considered in the absence of contraindications. **Aspirin is no longer recommended.**

**Mandatory blood tests:** Inflammatory markers are extremely useful in accurate GCA diagnosis, and initiating steroids can affect the result obtained. Therefore, **all** patients should have the following blood tests taken **immediately**

1. Plasma Viscosity 2. CRP 3. FBC, U&Es, LFTs

Please note that if transport is not available immediately:

The sample for plasma viscosity can be stored at room temperature for 24hours and for CRP refrigerated for 24 hours (ie awaiting routine transport to the lab the following day). If routine transport is not available within 24hours samples should be couriered to the RUH laboratory ASAP via taxi or other suitable means.

Alternatively, an Outpatient Phlebotomy service is provided at the RUH. Patients require a completed blood test form but appointments are not normally required. Normal opening hours are: Mon-Thu, 9.30am - 4.30pm & Friday, 9.30am - 3.30pm

**If you are unable to obtain blood from you patient or arrange sample transport please contact Rheumatology registrar for advice and to discuss options.**

Patient information: *Versus Arthritis GCA Patient information leaflet* [*https://www.versusarthritis.org/media/22273/giant-cell-arteritis-information-booklet.pdf*](https://www.versusarthritis.org/media/22273/giant-cell-arteritis-information-booklet.pdf)