Arthritis Rheumatology

Joint Swelling, Joint Contracture or Limp

Diagnosis commonly associated with arthritis and corresponding symptoms

- Juvenile Idiopathic Arthritis: Joint pain, swelling, or limited range of motion lasting >6 weeks
- Systemic JIA: Rash, prolonged fevers, elevated inflammatory markers, low energy or activity level (Please call on-call provider for expedited recommendations)
- · Lyme Arthritis: Typically mono arthritis, bulls eye pattern rash, recent travel to Lyme endemic areas
- Reactive arthritis: Joint swelling, limp, or limited range of motion following bacterial or viral illness. Symptoms will typically resolve within 6 weeks without long term sequelae.
- Myositis: Muscle weakness or pain, fatigue, elevated muscle enzymes
- Trauma: History of trauma, point tenderness, erythema, inflammation, instability
- Septic Joint: Fever, inability to bear weight, warmth, erythema, or swelling of the joint
- Oncologic: (Leukemia, Lymphoma, Bone Cancer) prolonged fever, joint or bone pain, lymphadenopathy, bruising or bleeding, weight loss, fatigue, night sweats

Pre-referral evaluation and work-up

- · Rule out infection, trauma, and septic joint
- Imaging
- CBC, CMP, ESR, CRP, ANA titre

When to refer to Rheumatology

- If patient has persistent joint swelling, limp, or contracture not associated with orthopedic abnormality, infection, or oncologic process
- · Referral should be based primarily on clinical symptoms. Markers of inflammation are often normal in Juvenile Idiopathic Arthritis

How to refer to Rheumatology



Please call 720-777-6132 to make an appointment

What records can referring providers send?

- Copies of relevant medical records and laboratory studies. If imaging studies have been completed, please send images on disk
- · Complete list of all medications and treatments used to treat symptoms as well as a complete list of all medications taken
- Please fax medical records needed for upcoming appointments to 720-777-7341

