



Rapid Referral to Rheumatology; A Pilot Study

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Background

- Rheumatoid arthritis (RA) requires early, aggressive treatment to prevent disability.
- This hinges upon early recognition, and prompt rheumatology referral.

Objective

- To measure the impact of a standardized rheumatology referral form on the recognition and management of RA by family physicians.

Design/Setting/Participants

- Physician survey at two university-affiliated family medicine clinics.

Participants/Intervention/Instruments:

- An initial survey was completed when no formal rheumatology referral form existed.
- A standardized rheumatology referral form was implemented, focusing on specific elements of history and physical findings (e.g. swelling, morning stiffness).
- Three and six months later, the survey was re-administered.

Outcomes

- The survey presented an unlabeled, classic RA patient vignette.
- Physicians were asked to rate their suspicion for RA, based on the vignette (high, moderate, low, couldn't say) and what elements of history and physical examination were most influential in raising their suspicion of RA.
- Finally, physicians indicated their management responses, in the setting of suspected RA.

Results

- 66 family physicians were surveyed each time.
- At baseline, 16/44(36.4%) of respondents had high suspicion of RA for the vignette.
- This increased to 10/17(58.8%), and 13/19(68.4%) in subsequent surveys(32.1% increase at six months, 95% CI 5.2, 52.6).

Baseline survey

While most family physicians appropriately suspect RA in the setting of relevant complaints, laboratory testing appeared to be more important than physical exam.

After the referral form implementation

Trend towards less reliance on laboratory testing and more emphasis on physical exam.

At 6 months

Majority of the family physicians with a high level of suspicion for RA indicated that they would immediately proceed to rheumatology referral, with only a few waiting for laboratory testing

Conclusions

- Pilot data suggest that a standardized rheumatology referral form may increase awareness of RA amongst family physicians.
- Less dependency on laboratory findings may result, with more prompt rheumatology referral.

Acknowledgement



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