**Coventry MSK Referral Form**

**Inflammatory Back Pain**

Patients: ≥16years with suspected inflammatory spinal pain requiring Specialist MSK Assessment & triage for management and possible Rheumatology referral

**For Guidance, please refer to:**

[GP Gateway Back Pain: Suspected Ankylosing Spondylitis & Spondyloarthritis (MSK Rheumatology)](https://www.coventryrugbygpgateway.nhs.uk/pages/back-pain-suspected-ankylosing-spondylitis-spondyloarthritis/)

[GP Gateway MSK Rheumatology Homepage](https://www.coventryrugbygpgateway.nhs.uk/pages/msk-rheumatology/)

# [NICE guidance N65: Spondyloarthritis in over 16s: diagnosis and management](https://www.nice.org.uk/guidance/NG65/chapter/Recommendations#recognition-and-referral-in-non-specialist-care-settings)

**For Urgent Advice contact us:** **Myaxspa@uhcw.nhs.uk**

**Key features please tick all that apply:**

|  |  |
| --- | --- |
|  | **Tick If Yes** |
| **Age of onset < 45 years** | [ ]  |
| **Insidious onset pain** | [ ]  |
| **Pain improved by exercise** | [ ]  |
| **Pain not improved by rest** | [ ]  |
| **Pain at night (with improvement on getting up & moving around)** | [ ]  |

**SPADE Tool: Please tick all that apply - See** [**www.spadetool.co.uk**](http://www.spadetool.co.uk) **for online calculation**

**Please complete SPADE tool (see below) to assist with triage and prioritisation, and refer to Rheumatology AxSpA (AS) clinic.** The SPADE tool has been designed to assist medical professionals define the probability of axial spondyloarthritis in a patient with chronic back pain, below the age of 45 with no definitive changes on X-ray

Inflammatory type of back pain [ ]

Heel pain (enthesitis) [ ]

Peripheral arthritis [ ]

Dactylitis [ ]

Iritis or anterior uveitis [ ]

Psoriasis [ ]

IBD (Crohn’s disease or ulcerative colitis) [ ]

Positive family history of axial SpA, reactive arthritis, psoriasis, IBD or anterior uveitis [ ]

Good response to NSAIDs [ ]

Raised acute-phase reactants (CRP/ESR) [ ]

HLAB27 [ ]

Sacroiliitis shown by MRI [ ]

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| Probability Definition: \_\_\_\_\_\_\_\_\_ (please use in conjunction with clinical assessment)See [www.spadetool.co.uk](http://www.spadetool.co.uk) for online calculation**Referral Form Details**

|  |  |
| --- | --- |
| **Patient Details** | **GP Practice Details** |
| NHS No |  | Referral Date |  |
| Patient Name |  | Practice Name |  |
| Patient Address |  | Usual GP |  |
| DOB  |  | Practice Address |  |
| Gender |  | Tel No: |  |
| Contact Number | Mobile:Home:  | Email |  |
| Email |  | Referring Practitioner (If different from above) |
| Main Spoken language  |  | Name of Referrer/Clinician |  |
| Interpreter Needed?/ Any additional requirement needed | Yes No | Address of Referring Practitioner |  |
| Transport Needed  | Yes No | Contact Number | Tel:Fax: |
| Appointment Urgency |  Urgent [ ]  Routine [ ]  |
|  |  |

**Examination:** Please include relevant clinical examination findings such as neurological assessment, any swollen or tender joints or extra-articular features, etc.

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| **Treatment so far:** (Analgesia,Physiotherapy, and response: Good /limited/no response) |

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| **Investigations**: please tick which and where requested (so that we can get the images and reports)[ ]  X-ray SIJ views[ ]  MRI Ensure AxSpa Protocol specified including SIJs and STIR sequencing**Note, MRI is not essential at this stage and should not delay referral**[ ]  CT [ ]  Bloods [ ]  HLA-B27 Any other relevant investigations:

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|  |
| **Clinical Information – Pre-populated from patient Records:**  |
| Past Medical History |  |
| Medication |  |
| Allergies  |  |
| Smoking Status |  |
| Alcohol Consumption |  |
| Latest BMI |  |
| Latest Blood Pressure |  |

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| **Triage Outcome (For Triage use only):**[ ]  Physio [ ]  Self-management[ ]  Advice and Guidance[ ]  Pain Team[ ]  Advanced Practitioner Physio appt[ ]  Secondary care: Rheumatology AxSpa Clinic [ ]  Injection [ ]  Surgical referral [ ]  |