

Diagnostic Toolkit for Physicians

Rapid referral to the rheumatologist is advised for a suspicion of RA with the presence of any of the following:

1. morning stiffness in affected joints lasting more than 30 minutes
2. swelling of three or more joints
3. involvement of the metacarpophalangeal (MCP) or metatarsal (MTP) joints with a positive squeeze test:



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Additionally, a history of fatigue, change in functional status, other risk factors (such as being female, age 30 to 55, and having a first-degree relative with RA) should alert the clinician and prompt referral.

Elevated ESR and C-reactive protein are suggestive, but not diagnostic. About 25% of patients with RA can have normal CRP and ESR.

Positive rheumatoid factor or anti-cyclic citrullinated peptide (anti-CCP) antibody tests should also raise the suspicion of an inflammatory arthritis and a rheumatological consultation (About 20 to 30% of patients can have RA with negative antibody tests).

