Surrey and Sussex Healthcare NHS Trust

Department of Rheumatology
Department of Ophthalmology

GCA REFERRAL PATHWAY

Do you think your patient has giant cell arteritis / temporal arteritis?

What are their symptoms?

NO OCULAR SYMPTOMS?

- New headache
- Scalp tenderness
- Jaw or tongue claudication
- Fevers, sweats, weight loss
- Shoulder/hip girdle stiffness and pain
- New limb claudication
- Nodular, thickened or tender temporal artery
- GCA more likely than alternative diagnosis (none of the above features are specific)

WITH OCULAR SYMPTOMS?

- Acute painless unilateral visual loss
- Intermittent episodes of temporary visual loss (amaurosis fugax)
- Altitudinal field loss or homonymous hemianopia
- Double vision

Bleep 296 to discuss with ophthalmology registrar ONLY if additional advice needed

If GCA *STRONGLY SUSPECTED* DON'T DELAY. Start 60mg prednisolone IF ocular symptoms OR jaw claudication. Otherwise 40mg prednisolone STAT.

Immediately arrange **URGENT BLOODS** (FBC, U+E, LFT, Calcium, CRP, ESR, TFT), **blood pressure** and **blood sugar**

(Within 1 hour of starting steroids, max 24 hours)

REFER TO RHEUMATOLOGY (bleep 469 in hours, acute medical team OOH)

REFER TO EYE CASUALTY (eye.clinic@nhs.net)

emails monitored constantly mon-fri 9-5pm, if you refer within these hours the patient will be contacted

Raised inflammatory markers and/or clinical suspicion of GCA after telephone triage:

- **REVIEW** by Rheumatology on Kingsfold Unit within 72 hours (usually next working day)
- **TREAT** (if not already done; IV steroids and admission *or* oral steroids and send home)

Normal bloods, low clinical suspicion of GCA

Discharge back to GP

Raised inflammatory markers and/or clinical suspicion of GCA after telephone triage:

- **REVIEW** by Ophthalmology in Eye Casualty within 24 hours
- **TREAT** (if not already done; IV steroids and admission *or* oral steroids and send home)

Consideration of temporal artery ultrasound (by rheum) and/or biopsy (by vascular surgeons)

Ongoing rheumatology follow up, patient education, bone protection

REFER TO RHEUM to arrange urgent follow up (sash.rheumatologysecretary@nhs.net)