

# Referral Letter for Pediatric Rheumatology Consultation

Date: [Insert Date]

To Whom It May Concern,

I am writing to refer my patient, **[Patient's Name]**, a [age] year old [boy/girl], who has been experiencing [brief description of symptoms, e.g., joint pain, swelling, fatigue] for the past [duration].

Medical History:

- Relevant medical history: [Include any pertinent medical history, previous diagnoses, surgeries, etc.]
- Current medications: [List any medications the patient is currently taking]
- Family history: [Any relevant family history]

Physical Examination Findings:

- Joint examination: [Describe any significant findings]
- Other findings: [Describe any other relevant findings]

Preliminary Investigations:

- [List any tests that have been conducted, e.g., blood tests, imaging studies, etc.]

Clinical Concern:

Given the symptoms and findings, I am concerned about the possibility of a rheumatologic condition, such as [suggested conditions, e.g., juvenile idiopathic arthritis, lupus, etc.]. I believe a comprehensive evaluation by a pediatric rheumatologist is warranted.

Please find attached copies of the relevant medical records and test results.

Thank you for your attention to this matter. I look forward to your evaluation and recommendations regarding this patient.

Sincerely,

[Your Name]

[Your Title]

[Your Clinic Name]

[Your Clinic Address]

[Contact Information]