

Date: [Insert Date]

To: [Specialist Name/Multidisciplinary Foot Clinic]

Department: [e.g., Podiatry / Orthopedics / Endocrinology]

Facility: [Insert Hospital/Clinic Name]

RE: Urgent Referral for Suspected Acute Charcot Arthropathy

Patient Name: [Patient Full Name]

Date of Birth: [DOB]

NHS/Medical ID: [ID Number]

Contact Number: [Patient Phone Number]

Dear Specialist,

I am writing to urgently refer this patient for evaluation of suspected acute Charcot Neuroarthropathy of the [Left/Right] foot.

Clinical Presentation:

The patient presented on [Date] with the following symptoms in the affected foot:

- Significant localized edema (swelling)
- Erythema (redness) that improves with limb elevation
- Increased skin temperature (measured at [Number] degrees difference compared to contralateral limb)
- [Insert: Presence/Absence] of pain or discomfort
- [Insert: Presence/Absence] of visible deformity

Relevant History:

- **Primary Diagnosis:** [e.g., Type 2 Diabetes / Peripheral Neuropathy]

- **Neuropathy Status:** [e.g., Confirmed loss of protective sensation via monofilament]

- **Recent Trauma:** [e.g., Minor trip, fall, or none]

- **Ulceration:** [Current or previous ulcer history]

- **HbA1c:** [Most recent result and date]

Current Management:

The patient has been advised to remain non-weight bearing on the affected limb until reviewed by your team. [Insert any other actions taken, e.g., X-rays ordered].

I would appreciate your urgent assessment, imaging (X-ray/MRI), and initiation of offloading (e.g., TCC) if the diagnosis is confirmed.

Yours sincerely,

[Your Name]

[Your Title/Designation]

[Practice Name]
[Contact Information]