

What is a Rheumatologist?

A rheumatologist is an internist or pediatrician who received further training in the diagnosis (detection) and treatment of musculoskeletal disease and systemic autoimmune conditions commonly referred to as rheumatic diseases. These diseases can affect the joints, muscles, and bones causing pain, swelling, stiffness, and deformity.



Autoimmune conditions occur when the immune system sends inflammation to areas of the body when it is not needed causing damage/symptoms. These diseases can also affect the eyes, skin, nervous system, and internal organs. Rheumatologists treat joint disease similar to orthopedists but do not perform surgeries. Common diseases treated by rheumatologists include osteoarthritis, gout, rheumatoid arthritis, chronic back pain, tendinitis, and lupus.

Many rheumatologists also conduct research to find a cause of and better treatment of a rheumatic disease.

How is a rheumatologist trained?

Rheumatologists must complete four years of medical or osteopathic education followed by three years of residency training in either internal medicine or pediatrics. Some rheumatologists are trained in both. After residency, they must enroll in a rheumatology fellowship for two - three years to learn about chronic musculoskeletal and autoimmune conditions and their treatment.

Rheumatologists then take a board examination to become board certified in rheumatology. This certification/exam has to be retaken every ten years. Physicians are also required to participate in a certain amount of continuing medical education on a yearly basis.

Where do rheumatologists work?

Rheumatologists work mainly in outpatient clinics. Primary care providers or other physicians can refer you to a rheumatologist for an evaluation. Some rheumatologists do not require a referral from another physician for appointments to be made. Rheumatologists are typically affiliated with a hospital and will be asked to evaluate patients who are hospitalized for a rheumatic disease.

When should I see a rheumatologist?

Everyone experiences muscle and joint pain from time to time. When the muscle and joint pain is not resolving as one would expect, additional evaluation may be needed. Typically, the primary care physician is seen for the first evaluation. If there is concern for an underlying rheumatic condition, he/she will refer you to rheumatology for evaluation.

Earlier referral should be made if you have relatives with autoimmune or rheumatic disease (as these conditions run in families) or if the symptoms are significantly worsening over a short period of time. Some of the signs and symptoms can improve or temporarily resolve when initially treated but can return once the medication is stopped. If the symptoms continue to return, a rheumatology evaluation may be needed. Although treatment should not be delayed while awaiting a rheumatology appointment, certain medications can improve symptoms and make a diagnosis more difficult.

Joint damage can occur if the symptoms of joint pain are ignored or not treated properly over a period of time. This damage cannot always be reversed with treatment and may be permanent. Do not delay appropriate evaluation.

What should I expect from my rheumatology visit?

Rheumatic diseases are sometimes complex in nature and difficult to diagnose, so rheumatologists will gather a complete medical history and perform a physical exam to look for signs and symptoms of inflammation throughout the entire body and musculoskeletal system. A family history can be very important to diagnosis of rheumatic disease and will also be assessed.

The rheumatologist will review the results of any prior testing that has been performed on a patient and may order additional laboratory tests to assess inflammation and/or extra antibody production within the bloodstream and order radiographic testing (X-ray, ultrasound, CT scan or MRI) to assess for musculoskeletal abnormalities.

All of these results will be combined to determine the source of a patient's symptoms and develop a personalized treatment plan. Treatment recommendations may include medications, referral to physical therapy, referral to other specialists, or joint/tendon injections. Some rheumatic diseases can be difficult to diagnose and may require several visits for the rheumatologist to fully understand the underlying process.

During follow-up appointments, rheumatologists may treat reoccurring conditions or talk with patients about medications, coping mechanisms, techniques for preventing disability or regaining function, and ways to improve their quality of life.

What should I bring to my first rheumatology visit?

Please bring the following to your first rheumatology visit:

- Any previous lab and/or radiographic X-ray/ultrasound/MRI tests results for review (medical records are typically sent by the referring physician, but occasionally – despite best intentions – are not present. Sometimes tests need to be repeated to confirm the result)
- An up-to-date medication list with the specific dosages you are taking (include a list of medications you have already tried to reduce duplication of prior treatments)
- A list of allergies to medications
- Your family history, including any known relatives with rheumatologic/autoimmune disease

Is specialty care more expensive?

Typically, the insurance co-pay is higher to see a specialist than a primary care physician. You may be surprised to learn that specialized care may save time and money in the long-term, as well as reduce severity of the disease. A rheumatologist has special training to spot clues in the history and physical exam that can lead to earlier diagnosis and is knowledgeable about testing that may reduce unnecessary procedures and save you money.

Updated May 2017 by Jillian Rose, LCSW and reviewed by the American College of Rheumatology Communications and Marketing Committee.

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