**Knee Pain

Sample Referral Letter for Red Flags**

[Date]

[Medical Practitioner’s Name and Address]

Re: [Patient’s Name] – Date of Birth: [Patient’s Date of Birth]

Dear Dr. [Doctor’s Name],

Thank you for seeing [Patient’s Name] who presented at my clinic today with the following concerning clinical findings:

[Specify – Some examples are below:]

History of a significant injury

Severe pain

Unrelenting pain

Nocturnal pain

Unexplained weight loss

Fever

Deformity

Large joint swelling

Significant loss of range of motion

Significant neurological impairment

Severe tenderness on palpation or severe pain with any examination procedure

I have discussed my concerns regarding the above findings with [Patient’s Name] and have recommended that they see you for a medical evaluation immediately. With [Patient’s Name]’s consent, I would be grateful if you would inform me of the results of your assessment and investigation.

Please do not hesitate to contact me if you require further information.

Yours sincerely,

[Your Name]

[Your Qualifications]