



PsA new patient checklist

<p>Confirm the PsA diagnosis and discuss the patient's ultimate goals of therapy</p>	<ul style="list-style-type: none"> • Ensure the patient has had all the appropriate tests to diagnose their PsA. • Consider what the patient wants to achieve from therapy. <ul style="list-style-type: none"> » Priorities could be things such as controlling symptoms, ability to return to work, and regain of social life.
<p>Establish patient knowledge of PsA</p>	<ul style="list-style-type: none"> • Has the patient done any research prior to their appointment, or do they know anyone else with PsA? • It is important to create a safe space where the patient feels they can ask questions about their disease and treatment options.
<p>Consider the domains involved*</p>	<ul style="list-style-type: none"> • Ask the patient if they have any symptoms that are suggestive of: <ul style="list-style-type: none"> » Peripheral arthritis » Axial disease » Enthesitis » Dactylitis » Psoriasis » Nail disease
<p>Consider previous therapies</p>	<ul style="list-style-type: none"> • Ask the patient which therapies they have been prescribed previously. • Explore why the patient is no longer using these therapies. • Consider asking if the patient is using any over-the-counter or alternative treatments, and offer advice on these.
<p>Examine the patient's preferences</p>	<ul style="list-style-type: none"> • Consider which treatments will fit in with the patient's lifestyle, i.e., an oral tablet/injection/infusion. • Consider the side effect profile of potential therapies and what side effects would be acceptable to the patient. • Consider if the patient will experience difficulties taking certain medicines, i.e., due to a needle phobia or because they cannot easily travel to hospital for an infusion. • If appropriate, discuss the financial limitations of treatment.
<p>Discuss comorbidities*</p>	<ul style="list-style-type: none"> • Has the patient been diagnosed with any of the following associated conditions/comorbidities? <ul style="list-style-type: none"> » IBD » Uveitis » Cardiovascular disease » Obesity » Fatty liver disease » Active hepatitis B or C » HIV » TB » History of and/or current malignancy » MS » Mental health • Explain to the patient how their comorbidities can affect their treatment options. • If needed, refer the patient to another specialist or patient helpline.†

<p>Discuss patient lifestyle factors</p>	<ul style="list-style-type: none"> • Consider asking the patient about lifestyle factors such as: <ul style="list-style-type: none"> » Smoking » Diet » Alcohol intake » Activity level • If appropriate, advise the patient about lifestyle changes they could make to improve their quality of life and refer to another specialist or patient helpline for support with any changes recommended.*
<p>Consider the patient's current quality of life</p>	<ul style="list-style-type: none"> • Does the patient struggle to carry out their normal daily tasks? If so, why? • What is currently having the largest impact on their day-to-day life? • Determine if the patient has any mental health needs, and consider previous history and referral if needed. <ul style="list-style-type: none"> » If needed, refer the patient to another specialist or patient helpline for support with their mental health.†
<p>Discuss future plans and treatment</p>	<ul style="list-style-type: none"> • Ensure the patient understands their treatment options and why a certain treatment may be better than others; you can refer to the treatment guidelines that may have informed your recommendation. • Agree a treatment plan with the patient. • Specify a timeframe for a follow-up appointment. • Referring a patient to a patient support program may help them become better informed about their disease and subsequently feel in control, whilst also offering peer support.

*For more information, treatment schema can be found overleaf.

†IFPA strongly believes that the best way to find information and further resources is to get connected to a patient association. Our priority is to connect IFPA's global members all around the world. Visit IFPA's members page for a list of member associations: <https://ifpa-pso.com/about-ifpa/members>



IFPA encourage you to contact local associations for support in living with psoriatic arthritis
– IFPA continues to stress the importance of the patient-provider relationship when making any treatment decisions and that the patient should remain at the center of decision-making processes.

Abbreviations:

HIV, human immunodeficiency virus; IBD, inflammatory bowel disease; MS, multiple sclerosis; PsA, psoriatic arthritis; TB, tuberculosis



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