

## Electronic templates and the management of patients with low back pain

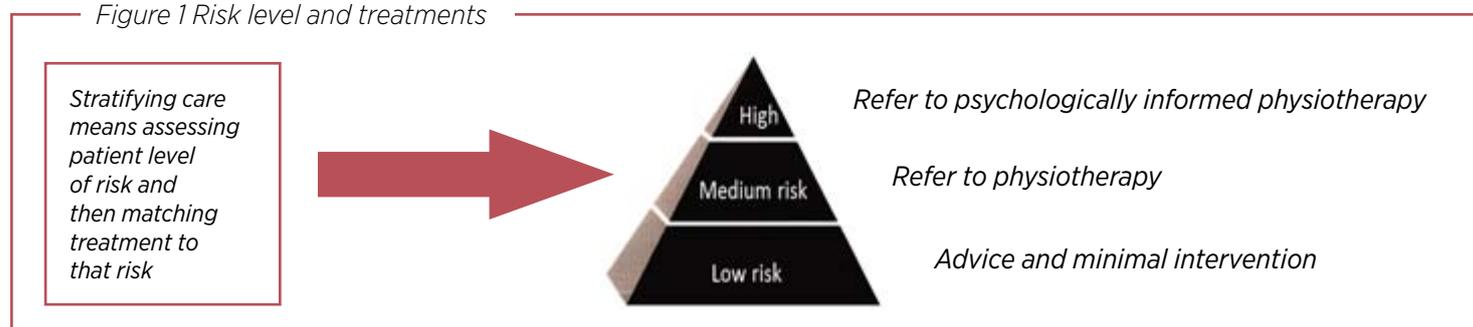
Most patients who present with back pain to primary care do not have a serious underlying condition. The STarT Back approach uses a brief easy-to-complete 9-item tick-box tool to assess risk (of persistent pain and disability) and support management<sup>1</sup> (see Figure 1). Evidence shows that using this stratified care approach to provide matched treatment for this group of patients is clinically and cost effective.

### Relevance to practice

Clinicians told us that a computer template, including the STarT Back tool, could assist them in their management of patients with low back pain. The template would need to:

- be quick and simple to use
- auto-calculate the risk score
- recommend treatment options
- generate auto-populated physiotherapy referral forms when necessary

Figure 1 Risk level and treatments



### Local engagement

General Practitioners in North Staffordshire assisted with the design of a template that can be embedded within the EMIS system. The template:

- opens when back pain codes are entered
- asks the clinician to screen for red flag symptoms and signs to exclude serious disease
- incorporates the STarT Back screening tool (9 questions) and automatically generates a risk score for poor outcome
- incorporates 'pop-ups' on the computer screen to recommend treatment options
- auto-populates physiotherapy referral form (if required)

Local patients helped to design bespoke information for GPs on [patient.co.uk](http://patient.co.uk)



### Key messages for clinicians and commissioners

- Stratified care for back pain is clinically and cost effective
- A stratified approach helps to keep physiotherapy waiting lists low
- An embedded template incorporating the STarT Back tool is quick and easy to use in routine consultations
- Auto-populated physiotherapy referral forms are generated when needed

### References

- <sup>1</sup> Hill, J.C., Whitehurst, D.G., Lewis, M., Bryan, S., Dunn, K.M., Foster, N.E. et al. (2011) **Comparison of stratified primary care management for low back pain with current best practice (STarT Back): a randomised controlled trial.** *The Lancet* 378(9802), 1560-1571.

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# An electronic template for osteoarthritis consultations

- ◇ Primary care of osteoarthritis (OA) is not consistent with national and international guidance
- ◇ Structured computerised forms (templates) to complete during a consultation improve some aspects of clinical care including adherence to some processes of care
- ◇ GPs and practice nurses are used to such templates as part of their routine consultation recording
- ◇ We implemented a new template to guide and record consultations for OA

Fig. 1 EMIS Web template example



*'GPs emphasised how using the template fitted with their existing work patterns, made them more pro-active, and alerted them to checking on pain relief. This was presented as "I just do a bit more than I used to"'*<sup>2</sup>



The evaluation of the template was positive. Approximately two-thirds of patients with OA or joint pain had at least one template entry completed.

There was substantial variation between clinicians. A quarter completed at least one entry for 9 out of 10 patients but another quarter did

not record any entry for more than half of their patients. Introduction of the template was associated with a significant increase in:

- ◇ Weight recording
- ◇ Prescription of NICE-approved first line analgesia e.g. topical NSAIDs<sup>1</sup>

The template was triggered by a wide range of OA and joint pain codes considered by a panel of 6 GPs to represent possible underlying OA. It sought to capture aspects of assessment and care not uniformly well-captured by the standard electronic record, including<sup>1</sup>:

- ◇ Pain and function assessments
- ◇ NICE guideline core interventions of information provision, exercise advice, and weight loss advice
- ◇ Physiotherapy use
- ◇ First-line analgesic use—paracetamol and topical non-steroidal anti-inflammatory (NSAIDs)

## References

1. Edwards, J.J., Jordan, K.P., Peat, G., Bedson, J., Croft, P.R., Hay, E.M., *et al.* **Quality of care for OA: the effect of a point-of-care consultation recording template.** *Rheumatology* 2014 doi: 10.1093/rheumatology/keu411
2. Ong, B.N., Morden, A., Brooks, L., Porcheret, M., Edwards, J.J., Sanders, T. *et al.* **Changing policy and practice: making sense of national guidelines for osteoarthritis.** *Soc Sci Med* 2014;106:101-09 doi: 10.1016/j.socscimed.2014.01.036

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