

Physiotherapist-led orthopaedic triage

Assessment and management of musculoskeletal disorders in primary care

Akademisk avhandling

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Avhandlingen baseras på följande delarbeten:

- I. **Samsson KS**, Larsson MEH. Physiotherapy screening of patients referred for orthopaedic consultation in primary healthcare - A randomised controlled trial. *Manual Therapy*, 19 (2014) 386-391.
- II. **Samsson KS**, Bernhardsson S, Larsson MEH. Perceived quality of physiotherapist-led orthopaedic triage compared with standard practice in primary care: A randomised controlled trial. *BMC Musculoskeletal Disorders*, 2016, 17:257.
- III. **Samsson KS**, Larsson MEH. Physiotherapy triage assessment of patients referred for orthopaedic consultation – Long-term follow-up of health-related quality of life, pain-related disability and sick leave. *Manual Therapy* 20 (2015) 38-45.
- IV. **Samsson KS**, Bernhardsson S, Larsson MEH. Take me seriously and do something! – A qualitative study exploring patients' perceptions and expectations of an orthopaedic consultation. *In manuscript*.

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Abstract

The overall aim of this thesis was to evaluate physiotherapist-led orthopaedic triage of patients with musculoskeletal disorders in primary care in comparison to standard practice. The thesis comprises two studies (A and B) reported in four papers. **Methods:** Study A was a randomised controlled trial, in which patients were randomised to either physiotherapist-led orthopaedic triage or standard practice (i.e. directly to orthopaedic surgeon consultation), with the aims to evaluate selection accuracy for orthopaedic intervention (Paper I, n=203), to evaluate patients' perceived quality of care (Paper II, n=163), and to report a long-term follow-up of patient-reported outcomes (Paper III, n=203). Study B was an exploratory qualitative study, aiming to explore patients' perceptions and expectations of an upcoming orthopaedic consultation (Paper IV, n=13). **Results:** Study A showed that selection accuracy was significantly higher with physiotherapist-led orthopaedic triage, i.e. a significantly larger proportion of patients selected for orthopaedic surgeon consultation was found appropriate for orthopaedic intervention, compared with standard practice. Participants perceived significantly higher quality of care with physiotherapist-led orthopaedic triage than with standard practice. The long-term follow-up showed that the participants rated a significantly better health state three months after the physiotherapist-led orthopaedic triage, compared with standard practice; however, there were no other statistically significant differences in other patient-reported outcomes. The analysis in Study B resulted in five categories: Hoping for action, Meeting an expert, Having a respectful meeting, Participating in the consultation, and A belief that hard facts make evidence. Across the categories, an overarching theme was formulated: Take me seriously and do something! **Conclusions:** The findings in Study A suggest that physiotherapist-led orthopaedic triage for patients with musculoskeletal disorders can provide timely access to assessment by an appropriately qualified healthcare professional who can direct patients to the most appropriate management pathway, and provide care with good perceived quality, without compromising long-term patient-reported outcomes. The main finding from Study B, that patients expect to be taken seriously and for something to happen during, or as a consequence of, the orthopaedic consultation, can serve to improve patient-clinician relationships and to inform the development of new models of care such as physiotherapist-led orthopaedic triage.

Keywords: Expectations, Orthopaedic surgeon consultation, Musculoskeletal disorders, Physical therapy, Physiotherapy, Perceptions, Primary care, Selection accuracy, Quality of care, Waiting time