

## Surgeons support nonphysician screens for low back pain

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Most spine surgeons are interested in a nonphysician clinician model of care for screening of low back or low back-related leg pain for patients referred for a surgical assessment, according to a study published in the April 1 issue of *Spine*.

(HealthDay)—Most spine surgeons are interested in a nonphysician clinician (NPC) model of care for screening of low back or low back-related leg pain for patients referred for a surgical assessment, according to a study published in the April 1 issue of *Spine*.

Jason W. Busse, D.C., Ph.D., from McMaster University in Hamilton, Ontario, Canada, and colleagues administered a 28-item survey to 101 surgeon members of the Canadian Spine Society to explore <u>attitudes</u> toward involvement of NPCs for screening patients with low back or low back-related <u>leg pain</u> referred for surgical assessment. The survey was completed by 85 spine <u>surgeons</u>.



The researchers found that 77.6 percent of surgeons were interested in working with an NPC to screen patients referred for elective surgical assessment. Greater surgeon interest in the NPC model of care correlated with perception of suboptimal wait time for consultation and poor screening efficiency. Majority consensus was achieved regarding the key components for a patient history and examination, and indicators for surgical assessment. If indications for surgery were ruled out by an NPC, 75.3 percent of surgeons agreed that they would be willing to forgo assessment of patients with low back-related complaints referred to their practice.

"The majority of Canadian spine surgeons were open to an NPC model of care to assess and <u>triage</u> non-urgent or emergent low back-related complaints," the authors write. "<u>Clinical trials</u> to establish the effectiveness and acceptance of an NPC model of care by all stakeholders are urgently needed."

Several authors disclosed relevant financial activities that were unrelated to the study.

## More information: Abstract

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