

AMC Occupational Health Adult Spine Guideline Operational Definitions

See Adult Spine Guideline Collection Tool also.

1. Patient has imaging scheduled/ referred/ appointment within 6 weeks following spine care diagnosis/treatment (includes plain spine films, MRI, CT or Myelogram).
 - 1a. The patients in Question 1 that received imaging in the first 6 weeks following spine care diagnosis or onset of treatment meet the ICSI or Work Comp imaging criteria on the back of the Spine Care CCI Collection Tool.
 - I. If the patient has any one of the situations described in the ICSI criteria for low back x-rays, then the x-ray is considered meeting the guidelines. If the patient condition or circumstances meet ANY of the four conditions listed in the Minnesota Workers Compensation Treatment parameters, then they are considered to be within guidelines.
 - 1b. If no imaging was obtained in the first 6 weeks of care, this is assumed to be care within guidelines.
2. The patient received spine care education in the form of a brochure or exercise sheet and this was documented in the chart at audit, on provider note chart visit sheet or Report of Workability.
3. A medication order is noted in the audited patient's chart.
 - 3a. Generic medications include ASA, APAP, Motrin (Ibuprofen), Naproxen, Sulindac (Clinioril), Cyclobenzaprene (Flexeril). All other medications are considered Other.
4. The definition of Phase II is that if physical therapy (PT), chiropractic (CH) or massage therapy (MS) is scheduled/referred/appointment at a spine care visit. If one or more of these additional treatments have been ordered, the patient has entered Phase II and the question would be answered Yes. If the patient did not receive any of these three, the answer is No.
5. Phase III is defined as the point at which consultation to advanced imaging, Orthopaedics, neurosurgery, neurology, anesthesia pain control, injection therapy, or intensive rehabilitation occurs.
 - 5a. The operational definition of intensive rehabilitation is:
 - a. Consult that is obtained which includes an assessment of spine strength in an objective manner (MedX) compared to normal population control for age and sex.
 - b. The spine care consultant using history, exam, and objective strength testing of the spine offers an assessment of appropriateness of intensive rehabilitation and communicates this to the primary care provider.