Neck and Upper Back Pain & Disability Module

- the second module of the Certificate in Musculoskeletal Medicine

<u>Aims</u>

This module aims to outline an efficient and careful approach to the assessment and management of patients with cervical and thoracic spinal pain seen in a General Practice, Pain Medicine or Rehabilitation setting. It aims to teach the clinical features that offer the best route to a specific diagnosis and will discuss current management options. It aims to cover the key elements of history taking and examination by providing registrants with the opportunity to practice examination tests on each other under supervision. Tests will include movement assessment, palpation of key surface anatomy landmarks in the spine and special tests to make an accurate diagnosis. There will be also be discussion of the benefits and limitations of spinal investigations and general and condition-specific management strategies for use in general practice. Small group case discussions and personal feedback on examination techniques will be used to enhance learning.

Learning Outcomes

- 1. Develop a systems based approach aimed at avoiding missed clinical features in the assessment of neck and upper back complaints that may lead to misdiagnosis and inappropriate/unnecessary investigations and/or management
- 2. Utilise evidence-informed history taking methods for patients with neck and upper back complaints
- 3. Conduct a reliable and valid physical examination of patients with neck and upper back complaints
- 4. Utilise investigations for neck and upper back pain judiciously and interpret the results in light of existing evidence about them.
- 5. Outline clinical reasoning skills utilised in the diagnosis of neck and upper back complaints
- 6. Effectively and appropriately manage patients with neck and upper back complaints, including the provision of evidence based advice

Detailed Schedule for Workshop on 11 November, 2017

TOPIC	ELEMENTS	LEARNING METHOD	TIME ALLOCATION
Introduction	 Housekeeping Outline of LOs and schedule for the day Emphasise requirement to examine each other 	Lecture	10 minutes
Basic knowledge and principles	 Diagnostic frameworks Dysfunction Pathoanatomical Dwyers and Bogduk diagrams Pain referral patterns dermatomal/myotomal/peripheral nerve /myofascial shoulder/head/upper limb/chest/abdomen Mechanisms and pathology of whiplash Non-musculoskeletal symptoms associated with spinal dysfunction 	Interactive discussion of prereading	30 minutes
History	 Introduction of neck and upper back pain cases Pain diagram Red flags Yellow flags Best questions for mechanical symptoms Best questions for neurological symptoms Present and past treatments and responses to them Past investigations/blocks Occupation/hobbies/sports Psychosocial assessment – questions and questionnaires Assessment of disability/loss of function - questions and questionnaires 	Interactive discussion of prereading Case discussions	45 minutes
Morning tea			15 minutes

TOPIC	ELEMENTS	LEARNING METHOD	TIME ALLOCATION
Examination	 Inspection Gross range of movements +/- overpressure Provocative tests - quadrant test, Spurling's test, brachial plexus tension test Neurological – power/reflexes/sensation Palpation- landmarks/muscle/trigger points/skin/stiffness/tenderness Debrief on positive findings after completion of examinations Explain examination findings of neck and upper back pain cases but introduce alternative examination findings to illustrate differences between somatic referred pain and radicular pain etc 	Limited demonstration followed by practice of examination techniques on each other with review by tutors. Discussion of signs found on participants. Case discussions	90 minutes
Investigation	 Guiding principles Benefits vs risks pretest probabilities tailoring investigations to specific presentations Interpretation of results in context Xray vs CT vs MRI vs other – WA guidelines Blood tests Investigation of whiplash Workcover and medicolegal aspects Use of injections as an investigation after briefing patient about them Explain investigation findings of neck and upper back pain cases but introduce illustrative alternatives 	Interactive discussion of prereading Case discussions	10 minutes 30 minutes 15 minutes
Lunch			30 minutes

TOPIC	ELEMENTS	LEARNING METHOD	TIME ALLOCATION
Clinical reasoning and diagnosis	 Flow diagrams illustrating key features of common and/or important syndromes Trials of treatment informing diagnostic probabilities 	Interactive discussion of prereading Case discussions	30 minutes
Management	 Education Manual techniques - teach PA mobes and indirect rotational mobilization, post-isometric relaxation with stretching. Include limitations. Exercises 5-6 targeted exercises. What not to do Medication Ttrigger point injections and greater occipital nerve block – indications and techniques Others 	Interactive discussion of prereading Demonstration and practice of manual techniques and exercises on each other Demonstration of injection techniques Case discussions	10 minutes 30 minutes 20 minutes 20 minutes
Afternoon tea			15 minutes
Followup and monitoring	 Illustrations of simple tools that can be used efficiently in general practice Discussion of timing of followup 	Lecture	10 minutes
Review of the workshop and next steps	 Key learning points in each section Outline of post workshop activities and ALM and certificate requirements Future modules and learning opportunities Completion of evaluation forms 	Lecture and evaluation form completion	20 minutes
Assessment of competency	 Examination skills assessed on the day. Need to participate to pass. Offer supplementary teaching at end of day. 15 MCQs on theoretical material including prereading 	During physical examination segment Test	20 minutes

Proposed timeframe – 8.30 am to 5 pm (8 ½ hours) including time for questions and an hour for mealbreaks

Prereading will include resources on

- Basic definitions including diagnostic framework
- Pathoanatomical causes
- Whiplash associated disorder pathology and guidelines
- Prognosis for neck and upper back pain
- cervical and thoracic spinal referred pain syndromes
- History taking
- Physical examination and surface anatomy videos
- Radiology guidelines
- Manual therapy
- Injection techniques
- Use of medications
- Pain and disability outcome measures for use in practice