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Are We Following ACP Guidelines regarding Lower Back Pain?
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Background: Knowing imaging guidelines and the features of back pain help clinicians make appropriate decisions about the management of lower back pain. This improves the efficiency of treatment and saves unnecessary financial burden to the patient as well as the healthcare system (1,2). This study aims to determine compliance of Rutgers Internal Medicine Ambulatory Care Center (ACC) practitioners in evaluating patients presenting with lower back pain based on the American College of Physicians (ACP) guidelines from 2017.

Methods: The study is a retrospective chart analysis of demographic data, alarm symptoms, and imaging decisions in patients who visited the ACC at University Hospital from Jan to Dec 2019 with a chief complaint of lower back pain. Chi square test was used to study the significance in factors affecting guideline applications.

Results: A total of 172 patients, 111 females and 61 males aging 19 to 49 years were included. We found that 61.6% were following, 11.0% were not following and 27.3% it was unknown if they were following the ACP imaging guidelines from 2017. Chi square study found significant differences in age, gender and onset affecting alarm symptom documentation (P < 0.05), but not affecting guideline applications (P > 0.05).

Conclusion:
These results demonstrate that there is room for improvement in documenting alarm symptoms in patients with back pain. It is important to capture back pain alarm symptoms in different demographics and those with different timeframes for the onset of pain. Special attention should be paid to women, young people and patients with a subacute onset of lower back pain. Another way to improve outcomes may be to create a lower back pain dot phrase in the Epic EMR that would include detailed back pain questions and alarm symptoms.

References: