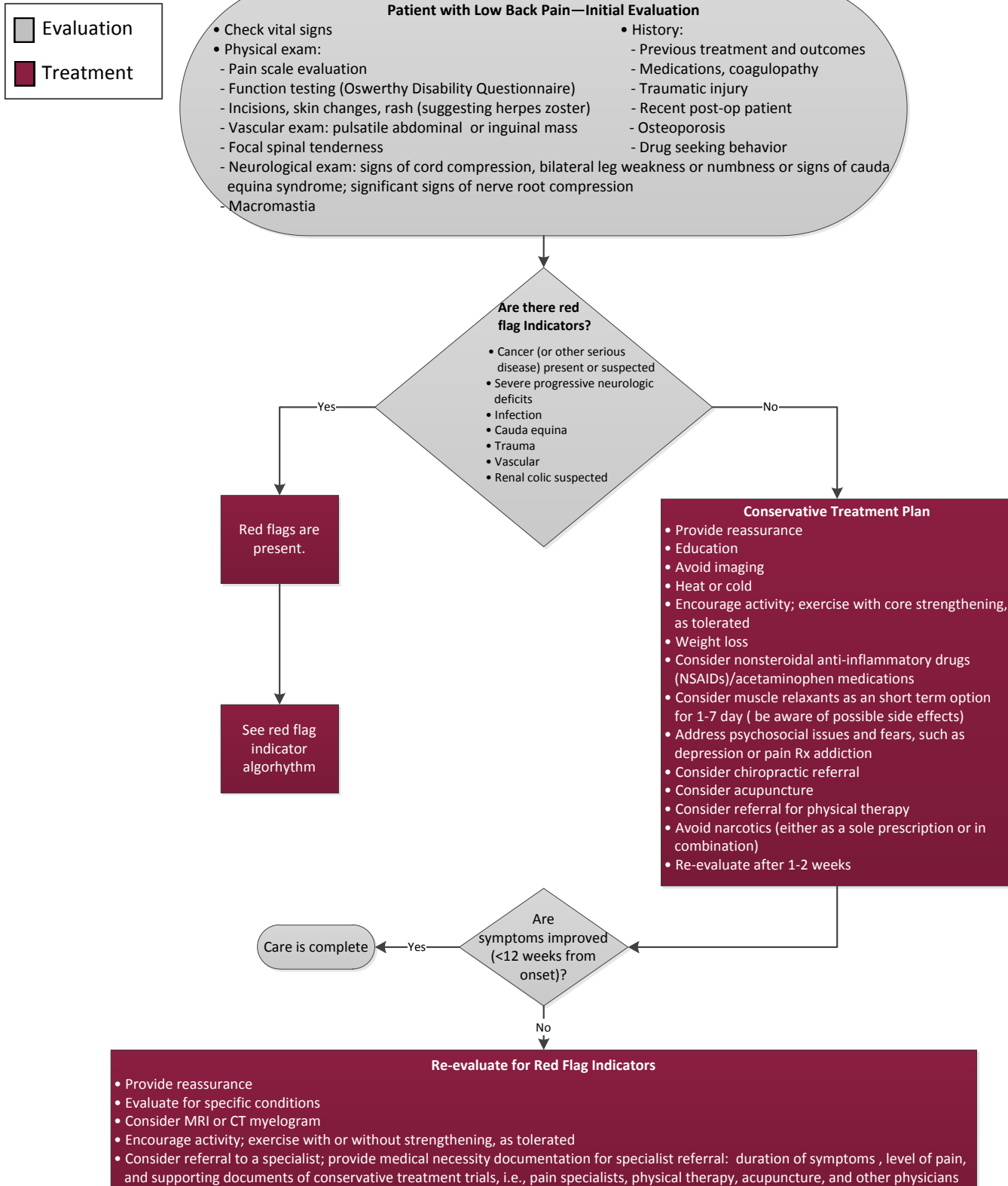


Acute Low Back Pain Clinical Guideline

Low back pain is the second most common reason for clinical visits in the U.S. Only 15 percent of all low back pain has an anatomical explanation and 84 percent of adults have low back pain at some point; it is usually a benign, self-limiting condition. Ninety percent of these patients resolve within six weeks regardless of intervention. **Acute low back pain** last no more than 4 weeks. **Subacute low back pain** last between 4 to 12 weeks and may develop into **Chronic low back pain** which persist for greater than 12 weeks.

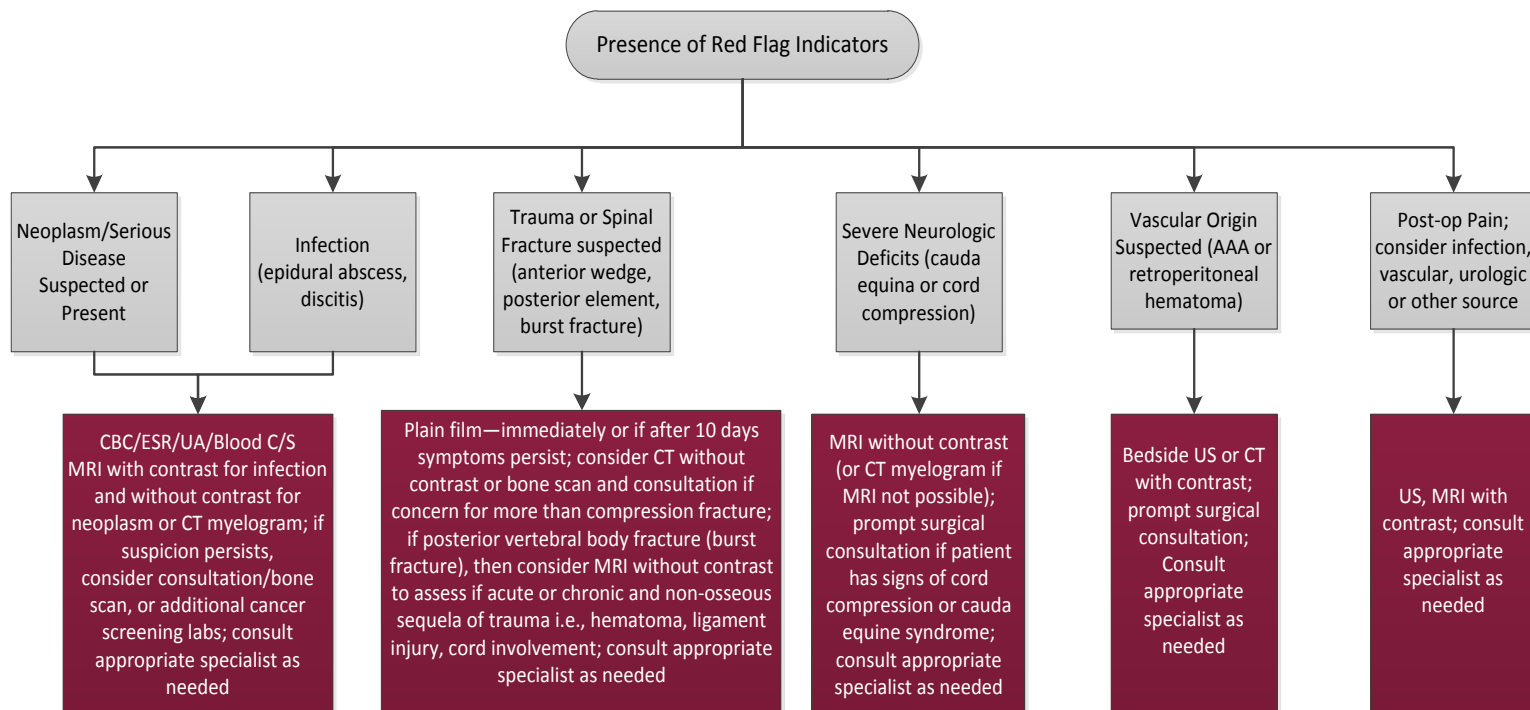


Quick Guide to Low Back Pain Treatment

- Initial exam: rule out red flag indicators and high-risk patients
- Document presence or absence of red flag indicators

If red flag indicators are absent:

- Begin conservative treatment approach
 - Encourage activity and heat
 - Encourage non-pharmacological approach
 - Patient education and expectations of testing and treatment
- Acetaminophen (caution if liver disease)
- NSAIDs/Ibuprofen (caution if Diabetes, renal disease, ulcer disease/ GERD, antiplatelet, or anticoagulant therapy)



Risk factors for cancer related to back pain imaging:

- Age >50 or history of cancer
- Failure of improved symptoms after 4-6 weeks of conservative back pain therapy
- Unexplained weight loss

****If unsure that patient is an appropriate candidate for MRI, call radiographers for assistance and guidance: Mount Carmel East MRI Department, 614-234-7585.**

Oswestry Low Back Pain Disability Questionnaire

The Oswestry Disability Index (also known as the Oswestry Low Back Pain Disability Questionnaire) is an extremely important tool that researchers and disability evaluators use to measure a patient's permanent functional disability. The test is considered the 'gold standard' of low back functional outcome tools.

Scoring instructions:

For each section the total possible score is 5: if the first statement is marked the section score = 0; if the last statement is marked, it = 5. If all 10 sections are completed the score is calculated as follows:

Example:

16 (total scored)

50 (total possible score) x 100 = 32%

If one section is missed or not applicable the score is calculated:

16 (total scored)

45 (total possible score) x 100 = 35.5%

Minimum detectable change (90% confidence): 10% points (change of less than this may be attributable to error in the measurement)

Interpretation of scores:

0% to 20%: minimal disability:	The patient can cope with most living activities. Usually no treatment is indicated apart from advice on lifting sitting and exercise.
21%-40%: moderate disability:	The patient experiences more pain and difficulty with sitting, lifting and standing. Travel and social life are more difficult and they may be disabled from work. Personal care, sexual activity and sleeping are not grossly affected and the patient can usually be managed by conservative means.
41%-60%: severe disability:	Pain remains the main problem in this group but activities of daily living are affected. These patients require a detailed investigation.
61%-80%: crippled:	Back pain impinges on all aspects of the patient's life. Positive intervention is required.
81%-100%:	These patients are either bed-bound or exaggerating their symptoms.

Sources: Fairbank JCT & Pynsent, PB (2000) The Oswestry Disability Index. *Spine*, 25(22):2940-2953.

Davidson M & Keating J (2001) A comparison of five low back disability questionnaires: reliability and responsiveness. *Physical Therapy* 2002;82:8-24.

Retrieved from: http://www.rehab.msu.edu/_files/_docs/oswestry_low_back_disability.pdf

Continue on the next page...

Oswestry Low Back Pain Disability Questionnaire

Instructions:

This questionnaire has been designed to give us information as to how your back or leg pain is affecting your ability to manage in everyday life. Please answer by checking ONE box in each section for the statement which best applies to you. We realize you may consider that two or more statements in any one section apply but please just shade out the spot that indicates the statement which most clearly describes your problem.

Section 1— Pain intensity

- I have no pain at the moment
- The pain is very mild at the moment
- The pain is moderate at the moment
- The pain is fairly severe at the moment
- The pain is the worst imaginable at the moment

Section 2— Personal care (washing, dressing etc.)

- I can look after myself normally without causing extra pain
- I can look after myself normally but it causes extra pain
- It is painful to look after myself and I am slow and careful
- I need some help but manage most of my personal care
- I need help every day in most aspects of self-care
- I do not get dressed, I wash with difficulty and stay in bed

Section 3— Lifting

- I can lift heavy weights without extra pain
- I can lift heavy weights but it gives extra pain
- Pain prevents me from lifting heavy weights off the floor, but I can manage if they are conveniently placed, eg. On a table
- I can lift very light weights
- I cannot lift or carry anything at all

Section 4— Walking

- Pain does not prevent me walking any distance
- Pain prevents me from more than one mile
- Pain prevents me from walking more than 1/2 mile
- Pain prevents me from walking more than 100 yards
- I can only walk using a stick or crutches
- I am in bed most of the time

Section 5— Sitting

- I can sit in any chair as long as I like
- I can only sit in my favorite chair as long as I like
- Pain prevents me sitting more than one hour
- Pain prevents me from sitting more than 30 minutes
- Pain prevents me from sitting more than 10 minutes
- Pain prevents me from sitting at all

Section 6— Standing

- I can stand as long as I want without extra pain
- I can stand as long as I want but it gives me extra pain
- Pain prevents me from standing for more than one hour
- Pain prevents me from standing for more than 30 minutes
- Pain prevents me from standing for more than 10 minutes
- Pain prevents me from standing at all

Section 7— Sleeping

- My Sleep is never disturbed by pain
- My sleep is occasionally disturbed by pain
- Because of pain I have less than 6 hours sleep
- Because of pain I have less than 4 hours sleep
- Because of pain I have less than 2 hours sleep
- Pain prevents me from sleeping at all

Section 8— Sex life (if applicable)

- My sex life is normal and causes no extra pain
- My sex life is normal but causes some extra pain
- My sex life is nearly normal but is very painful
- My sex life is severely restricted by pain
- My sex life is nearly absent because of pain
- Pain prevents any sex life at all

Section 9— Social life

- My social life is normal and gives me no extra pain
- My social life is normal but increases the degree of pain
- Pain has no significant effect on my social life apart from limiting my more energetic interests e.g., sport
- Pain has restricted my social life and I do not go out as often
- Pain has restricted my social life to my home
- I have no social life because of pain

Section 10— Travelling

- I can travel anywhere without pain
- I can travel anywhere but it gives me extra pain
- Pain is bad but I manage journeys over two hours
- Pain restricts me to journeys of less than one hour
- Pain restricts me to short necessary journey under 30 minutes
- Pain prevents me from travelling except to receive treatment

ICD-10 Diagnosis Codes

ICD 10 Code	Description
F45.41	Pain disorder exclusively related to psychological factors
M51.05	Intervertebral disc disorders with myelopathy, thoracolumbar region
M51.06	Intervertebral disc disorders with myelopathy, lumbar region
M51.15	Intervertebral disc disorders with radiculopathy, thoracolumbar region
M51.16	Intervertebral disc disorders with radiculopathy, lumbar region
M51.17	Intervertebral disc disorders with radiculopathy, lumbosacral region
M51.25	Other intervertebral disc displacement, thoracolumbar region
M51.26	Other intervertebral disc displacement, lumbar region
M51.27	Other intervertebral disc displacement, lumbosacral region
M51.35	Other intervertebral disc degeneration, thoracolumbar region
M51.36	Other intervertebral disc degeneration, lumbar region
M51.37	Other intervertebral disc degeneration, lumbosacral region
M51.85	Other intervertebral disc disorders, thoracolumbar region
M51.86	Other intervertebral disc disorders, lumbar region
M51.87	Other intervertebral disc disorders, lumbosacral region
M51.9	Unspecified thoracic, thoracolumbar and lumbosacral intervertebral disc disorder
M54	Dorsalgia
M54.00	Panniculitis affecting regions of neck and back, site unspecified
M54.05	Panniculitis affecting regions of neck and back, thoracolumbar region
M54.06	Panniculitis affecting regions of neck and back, lumbar region
M54.07	Panniculitis affecting regions of neck and back, lumbosacral region
M54.09	Panniculitis affecting regions, neck and back, multiple site in spine
M54.1	Radiculopathy
M54.10	Radiculopathy, site unspecified
M54.15	Radiculopathy, thoracolumbar region
M54.16	Radiculopathy, lumbar region
M54.17	Radiculopathy, lumbosacral region
M54.4	Lumbago with sciatica
M54.40	Lumbago with sciatica, unspecified side
M54.41	Lumbago with sciatica, right side
M54.42	Lumbago with sciatica, left side
M54.5	Low back pain



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This clinical guideline outlines the recommendations of Mount Carmel Health Partners for this medical condition and is based upon the referenced best practices. It is not intended to serve as a substitute for professional medical judgment in the diagnosis and treatment of a particular patient. Decisions regarding care are subject to individual consideration and should be made by the patient and treating physician in concert.