**Suggested Physician Scripts**

**If we take low back pain as an example, here are some suggestions of possible ways a provider might outline treatment options or plans and answer patient’s questions.**

**5 Recommendations** When talking to your patients about a treatment plan consider the following recommendations.

1. **Clarify your patient's true concerns.** Don’t assume you know what your patient is worried about - ask them.
2. **Provide the patient with simple, clear instructions.** Ensure they have all the information they need to understand the treatment plan you are recommending.
3. **Be courteous and respectful.**
4. **Provide a clear contingency plan.** Give a time frame of when they should expect to start feeling better or seeing an improvement.Work out a plan with them on what to do next if things get worse or the pain continues. Advise them when to come back to see you for re-evaluation and/or next steps.
5. **Make sure the patient is satisfied with the plan**. Don’t assume the patient is in agreement - ask them if they are okay with what you are suggesting. Ensure they don’t have any further questions or that something is not still worrying them about their condition or the treatment plan.

**General information - Low Back Pain**

* *Back pain is one of the most common reasons why people visit their doctor. The good news is that back pain often goes away on its own, and people usually fully recover in a few weeks or so.*
* *Low back pain is often related to muscle spasm. X-rays and MRIs won’t tell us anything of value in that case and won’t change recommended treatment.*
* *I would like to try a conservative treatment plan first. This will likely improve your symptoms. If not, we will re-evaluate after \_\_\_\_ days/weeks.*

***\*Provide the patient educational pamphlet regarding treating low back pain.***

**To explain treatment plan of “non-red flag” low back pain**

***Stay active****. Resting in bed for more than a day or so can cause stiffness, weakness, depression, and slow recovery. Things like walking or water aerobics are usually most effective. Exercise is often the best way to relieve lower-back pain.*

***Apply heat****. A heating pad, electric blanket, or warm bath or shower relaxes muscles. Some patients find* ***cold packs*** *helpful; or you can try alternating heat and cold treatments. Do what feels most comfortable for you and gives you the most relief.*

***Over-the-counter medicine.*** *Try over the counter medicines such as:*

* + - *Acetaminophen (Tylenol or generic)\**
		- *Ibuprofen (Advil or generic)\**
		- *Naproxen (Aleve or generic)*

*\*Note*: Can be taken together. These medications have different modes of action and do not interfere with each other.

***Sleep comfortably****. When lying on your side, a pillow between your knees may make you more comfortable; or when lying on your back, a few pillows under your knees may help.*

***Physiotherapy.*** *Some patients who have back problems like yours find physiotherapy very helpful. The physiotherapist can give you information and recommend a set of stretches and exercises that may help you recover faster now and may help strengthen your back muscles to prevent future episodes of back pain.*

***\*If you recommend treatment outside your office (e.g., physiotherapy) it is helpful to give a patient specific instructions, directions or referral.***

**If Patient Requests MRIs and/or X-Rays**

* *CT Scans, X-rays or MRIs are usually only done in the early stages of low back pain if we think surgery may be required. At this point, your symptoms do not indicate that this is the case.*
* *X-Rays and CT Scans do have risks due to radiation exposure. We only want to use them when we feel there is a real benefit to what they might tell us.*

**To explain when imaging for low back pain might be indicated**

* *MRI or X-Rays of the lower back are only indicated if there are signs of severe or worsening symptoms or there is a possibility of a serious underlying problem such as a spinal infection.*
* *If “Red Flags” symptoms are present, such as:*
* *Unexplained weight loss*
* *Fever*
* *Recent infection*
* *Loss of bowel or bladder control*
* *Abnormal reflexes, or loss of muscle power and/or feeling in the legs*

**If the patient is not getting better or is getting worse.**

Give clear instructions as to what the patient should expect (in a normal course of low back pain) and what would indicate that things may be getting worse and they need to see you for re-evaluation.

* *If your back pain does not improve after \_\_\_\_ days/weeks, I would like you to come back to see me. Then we may re-evaluate and see if there are some other treatments that we should consider.*
* *If your back pain is severe (and Tylenol, Aleve, etc. are not working), come back and we will look at how we might control your pain.*
* *If your symptoms worsen, especially if you start experiencing fever, loss of bowel or bladder control or loss of muscle power or feeling in the legs,* ***come to see me right away.***

**To ensure the patient understands and is satisfied with your treatment plan**

* *Does what I have outlined make sense and are you okay with the plan I am recommending?*
* *Do you have any further questions or concerns?*
* *Remember, if your back pain does not get better in a few weeks, I want you to come back to see me.*
* *If you do have further questions or concerns, please do not hesitate to come back and see me and we can discuss things further.*

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