Vale of York MSK Service Elbow Osteoarthritis Pathway



Pre-contact

MSK and CCG co-working on public

Media campaign promoting positive lifestyle change and MSK health and role of regular activity for low grade joint symptoms.

Health promotion regarding Work related upper limb disorders.

Promotional materials at strategic locations

Appropriately targeted community initiatives

SEO of web hub

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Patient presents to primary care with elbow

Primary care team to optimise pre MSK management using the MSK web hub for patient education and management or alternative offline resources.

Non- pharmacological management strategies:

Check BMI/ smoking/ exercise status:

If lifestyle factors highlighted discuss as risk factors for MSK ill health/OA. Refer to MSK web hub for lifestyle advice.

Pharmacological management

Optimise medication management as per NICE guidelines. Consider topical NSAIDS, oral NSAIDs plus PPI, Paracetamol. Address any maladaptive beliefs around medication useage in conjunction with MSK web resource

Radiology:

X Ray not required prior to referral

Onward referral options:

Understand/manage expectations prior to referral- what are the goals of onward

Condition management: MSK service- note patient must have engaged with online resources before making a referral to MSK.

Flair up management: MSK service- can offer 1 to 1 management for arthritis flair

Lifestyle management: Consider local referral options- smoking cessation, weight management, HEAL programme.

Complex condition management/ Arthroplasty: refer to MSK ESP team in cases of diagnostic uncertainty or if arthroplasty/ OK procedure needs to be discussed.

Urgent orthopaedic opinion (via ED) should be sought for acutely locked elbow due to IA loose body.

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Physiotherapy team to assist primary care in management of patients where web hub information and primary care strategies have not helped, where patients have self-referred, or where patient is experiencing

All patients regardless of access point should have a discussion of expectations and functional goals to support planned management pathway.

1:1 physiotherapy:

To explore education around osteoarthritis, discuss activity management strategies, signpost to medication advice, and provide specific exercise based interventions.

Flair up management:

The MSK service will offer 1 to 1 appointments for patients experiencing a flair up. If corticosteroid injection indicat ed consider whether this can be done Landmark or wether USGI is indicated.

Onward referral Options:

Medication management: refer to primary care team or Physio independent prescriberif medication optimisation required.

Lifestyle management: Consider local referral options- smoking cessation, weight management, HEAL programme, water based exercise oppertunities.

Complex condition management/Ultrasound guided injection/ orthopeadic options: refer to MSK ESP team in cases of diagnostic uncertainty, or significant disabiltiy, or if further intervention needs to be explored

To support primary care and physiotherapy teams in managment and diagnosis of complex case presentations. To support patients in their decisions regarding surgery and ensure alternative treatment options have been explored and Diagnostic uncertainty:

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to utilise clinical skills and experience supported by diagnostic imaging and procedures to propose a primary diagnosis or diagnoses for patients with complex elbow presentations or advanced disability.

Assurance of optimised conservative management:

To ensure conservative management pathways have been fully optimised for patients with lower limb osteoarthritis including: medication, exercise, pacing, and lifestyle factors AND ensure expectations have been discussed.

Ultrasound guided injection:

To provided guided injection into elbow joint for symptom management, where this is not possible by landmark guidance.

Support decision making regarding orthopaedic intervention

Support patients in their decision making as to whether to proceed with arthroscopy/ elbow replacement surgery. Refer appropriately to secondary care.

Onward referral options:

Medication management: refer to primary care team or Physio independent prescriber if medication optimisation required.

If secondary care pain services are required make recommendation for that referral to GP.

Condition management: refer to MSK Physiotherapy

Lifestyle management: Consider local referral options- smoking cessation, weight management, HEAL programme.

Orthopaedics: direct to list/outpatient opinion.

Elbow Osteoarthritis:

Diagnose Osteoarthritis clinically without investigation if a person-

Is 45 or over AND Has activity related joint pain AND Has either no morning joint related stiffness OR morning stiffness that lasts for no more than 30 minutes and has some observable reduction in joint range.

No history of trauma

Mechanical symptoms (i.e. locking) are not at the fore.