Potential pathway for managing work injury

ReturntoWorkSA

Initial visit

Clinical presentation

Assess for red flags

No flags present

Yes, flags present

Investigate & treat

- explain injury and reassure patient
- reinforce health benefits of work
- reinforce benefits of activity
- note potential yellow flags
- analgesia and manual techniques may provide short term symptom control
- advise investigations (i.e. imaging/testing etc) in first 4-6 weeks may not provide clinical benefit
- advise opiates and extended bed rest may be harmful.

Action:
Next appointment is booked as a double appointment.

Action:
- complete WCC
  * include capacity
  * provide RTW for 1-4 weeks.

Week 1 – 4

Consider: Patient completing Örebro in waiting room

Review: Follow-up appointment
- assess physical presentation
- note potential yellow flags
- explain and reassure
- advise to stay active and working
- control symptoms
- agree on a plan.

Consider:
- referral to suitable Allied Health
- case conference.

Action:
Next appointment is booked as double appointment.

Action:
- complete WCC
  * include capacity
  * provide RTW for 1-4 weeks.

Week 4 – 6

Consider: Patient completing Örebro in waiting room

Review: Follow up appointment

Symptoms have improved
- explain & reassure
- advise to stay active & working
- self-management and discharge.

Action:
- complete WCC
  * include capacity
  * provide full capacity date.

Symptoms are ongoing
- redcheck: Red flags
- Screen: Yellow flags.

Action:
Initiate complex plan.

Consider:
- referral to suitable Allied Health
- case conference
- referral to a mental health support service
- management of non-work related concerns via alternative pathways.

Developed from the New Zealand Acute Low Back Guide 2004.

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