

# S1 Acute Back and Radicular pain template screen shot

Acute low back pain (Xa0sm)  
Acute back pain with sciatica (X75rz)

Template View – this will display any cancer diagnoses

GP to discuss patient agreeing to be part of a study

**Back Pain**

Date	Selection
No previous values	

**Occupation – Read code browser option**

- Full-time employment (13JA.)
- Part-time employment (13JB.)
- On sick leave from work (Ua0Ur)
- Housewife (XE0oW)
- Retired (13J5.)
- Unemployed (13J7.)
- Student (133A.)

Show recordings from other templates  
 Show empty recordings

Full-time employment (13JA.)  
Part-time employment (13JB.)  
On sick leave from work (Ua0Ur)  
Housewife (XE0oW)  
Retired (13J5.)  
Unemployed (13J7.)  
Student (133A.)

Template View

The same codes as '1<sup>st</sup> acute attendance' page

Link to the STarT Back Tool

★ TEES Keele STarT Back - 9 item tool

TEES StarT Back - 9 item tool Score view cannot be shown without a patient

**Low score - verbal advice given, patient leaflet given**  
**Medium/High score - refer to T&TP, second patient leaflet given**

Patient given advice  [Link to patient information leaflets >>](#) [Patient information leaflet](#)

New Word referral using Back Pain and Radicular Pain Referral  [Link to referral form, if the patient's condition improves cancel referral](#)

Fitness for work statement issued   New MED3 statement

Examination findings

**Please comment on history of current episode, relevant examination findings and the duration**


Patient in local study NOS  [\\* This data item indicates that the patient has consented to share contact details and agreed to be contacted for the purpose of the evaluation \\*](#)

Show recordings from other templates  
 Show empty recordings


Acute Back and Radicular pain

1st acute attendance | 2nd attendance | Follow up | Red Flags | About

**Follow up**

Back Pain  


Red Flags << [Link to Red Flags, No X-Rays or MRI scans indicated unless Red Flags are present](#)


Discussion about clinical red flag warning signs   **Please use the pencil icon to state if Red Flags are present  
PLEASE REFER APPROPRIATELY AS PER RED FLAG GUIDANCE**


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Information | Print | Suspend | Ok | Cancel

**Back Pain**

Date ▾ Selection ...

No previous values

Show recordings from other templates  
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The same codes as '1<sup>st</sup> and 2<sup>nd</sup> acute attendance' page

Acute Back and Radicular pain

1st acute attendance | 2nd attendance | Follow up | Red Flags | About

**Red flags-important underlying pathology needs excluding:**

- \* H/O cancer
- \* Recent unexplained weight loss
- \* Progressive neurological symptoms, limb weakness
- \* Bilateral leg sciatica
- \* Positive Babinski ( upgoing plantars)
- \* Altered perinaeal sensation with reduced anal tone and squeeze
- \* Recent change in bladder/bowel control and or sexual function
- \* Fever/patient feeling systemically unwell
- \* Prolonged steroid use
- \* Unrelieved, continuous night pain
- \* New onset back pain < 16 and >60
- \* Immunocompromised- steroids, diabetes, biologics and other immunosuppressants

**Red flags - Recommended Responses**

- \* Cauda equina -URGENT SAME DAY- GP to contact spinal surgeons JCUH, or if not contactable send to A+E
- \* New or Progressive neurological deficit-URGENT SAME DAY- GP to contact spinal surgeons JCUH, or if not contactable send to A+E
- \* Spinal infection- URGENT SAME DAY- GP to contact spinal surgeons JCUH, or if not contactable send to A+E
- \* Suspected spinal tumour- Telephone referral to T&T, or GP to arrange URGENT MRI and once confirmed arrange 2ww referral to secondary care
- \* Suspected osteoporotic fracture- GP to arrange X-Ray and manage pain relief in primary care ( liaise with orthopaedics for advice if pain not controlled)
- \* Inflammatory disorders- eg Ankylosing spondylitis, GP to arrange URGENT referral rheumatology
- \* Limb weakness or progressive neurological deficit from suspected disc- GP URGENT referral TTP

*If any Red flags are present but not recorded please record appropriately.*

[1st acute attendance page](#) [2nd attendance page](#)

Information | Print | Suspend | Ok | Cancel

**Back Pain**

Date ▾ Selection ...

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TEES Keele STarT Back - 9 item tool

Page 1 About

### The Keele STarT Back - 9 item tool

Ask the patient to think about the **last 2 weeks** and respond to the following questions:

- 1) The back pain has spread down your leg(s) at some point in the last 2 weeks
- 2) There has been pain in your shoulder or neck at some time in the last 2 weeks
- 3) You only walked short distances because of your back pain
- 4) In the last 2 weeks, you have dressed more slowly than usual because of your back pain
- 5) Its not really safe for a person with a condition like yours to be physically active
- 6) Worrying thoughts have been going through your mind a lot of the time
- 7) You feel that your back pain is terrible and its never going to get any better
- 8) In general you have not enjoyed all the things you used to enjoy
- 9) Overall, how bothersome has your back pain been in the last 2 weeks

STarT (Subgroups for Targeted Treatment) Back Screening Tool

**>> Score 3 or less <<**  
StarT Back Screening Tool low risk

**>> Score 3 or less from questions 5-9 <<**  
StarT Back Screening Tool medium risk

**>> Score 4 or more from questions 5-9 <<**  
StarT Back Screening Tool high risk

**N.B The Sub Score is calculated from questions 5-9**

Discharge - Self Management with Patient Standardised literature

Still refer if there is strong clinical indication to do so

Refer to Triage and Treat Practitioner

Total score

3 or less

4 or more

Low risk

3 or less

4 or more

Medium risk

High risk

Sub score Q5-9

STarT (Subgroups for Targeted Treatment) Back Screening Tool

Date Units

No previous w

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Show empty recordings

Information Print Suspend Ok Cancel

Answers from the scored assessment automatically populates the total score (GP will need to calculate sub score)