

Name of the guideline:

Evidence-base Practice Guidelines for Low Back Pain

Description: The purpose of the *Evidence-base Practice Guideline for Low Back Pain* is to provide a resource for practitioners of chiropractic care, primary care, integrative therapies who wish to use an evidence-based Omaha System care plan for clinical decision support and documentation. The interventions in the care plan are encoded from the content of Evidence-based guidelines from various sources.

Low back pain (LBP) is a complex and challenging health care issue and often involves multiple providers across various care settings. Multiple providers for LBP can lead to fragmented care and frustration for both patients and practitioners. This 'silo' effect of healthcare can compromise communication for the health care team, lead to poor care coordination, and decrease continuity of care.

Chiropractors are a primary provider for patients experiencing LBP. In addition, chiropractors qualify as an eligible provider (EP) in order to receive incentive payments to avoid penalties. To qualify for meaningful use chiropractors must demonstrate meaningful use of an electronic health record (EHR) and use certified EHR software.

The purpose of the *Evidence-base Practice Guideline for Low Back Pain* was to demonstrate the feasibility of mapping evidence-based practice guidelines for low back pain related to spinal manipulation to the Omaha System to foster inter-professional communication and collaboration between practitioners and patients across settings. Facilitating clinical documentation using the Omaha System for low back pain spinal manipulation evidence-based clinical guidelines can generate meaningful useable data to evaluate clinical effectiveness and promote quality research.

The guidelines were identified to provide a complete and integrative approach to low back pain. A key point of the guidelines used in this study is the value of chiropractic care as an integral part of the patients' holistic plan of care.

Omaha System Problems:

Neuro-musculo-skeletal function

Pain

Physical Activity

Population: Persons with low back pain symptoms

Disease/Condition: Symptom management, health promotion

Practice settings: Chiropractic clinics/Integrative health care settings/Primary care

Levels of practice: Individual

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Sources:

Agency for Healthcare Research and Quality (2009). [Low back pain. Early management of persistent non-specific low back pain.](#) National Guideline Clearing House.

Agency for Healthcare Quality and Research (2011). [Guideline for Evidence-Informed primary Care Management of Low Back Pain. National Guideline Clearing House.](#) Available at: <http://www.guideline.gov/content.aspx?id=37954&search=low+back+pain>

Chou, R., Qaseem, A., Snow, V., Casey, D., Cross, J.T. Jr., Shekelle, P., Owens, D.K., Clinical Efficacy Assessment Subcommittee of the American College of Physicians, American College of Physicians, American Pain Society Low Back Pain Guidelines Panel. [Diagnosis and treatment of low back pain: A joint clinical practice guideline from the American College of Physicians and the American Pain Society.](#) *Annals of Internal Medicine*, 2007, 147(7), 478-91.

Goertz M, Thorson D, Bonsell J, Bonte B, Campbell R, Haake B, Johnson K, Kramer C, Mueller B, Peterson S, Setterlund L, Timming R. *Institute for Clinical Systems Improvement. Adult Acute and Subacute Low Back Pain.* Updated November 2012. Institute for Clinical Systems Improvement (2011). <https://www.icsi.org/asset/bjvqrj/LBP.pdf>