

Musculoskeletal Remote Consultations

Assessment Guidelines for Haemophilia Physiotherapists

Due to COVID19 many MSK contacts will be undertaken remotely by telephone or video. There are a variety of platforms used by NHS Trust. Some require patients to have a mobile phone, others an email address. The specific requirements will determine who is suitable for telephone or video calls. Video calls are best done with a reliable internet connection. If available, video contact is useful for anxious patients, those with multiple morbidities, or if you suspect a bleed is not responding to treatment to perhaps prevent the patient coming to the hospital. Before an initial video call it is advised to speak to the patient by telephone first to explain the video call process. Each software platform will be different and may come with an infographic instruction leaflet that can be sent to the patient. Do a test run with a colleague to familiarise yourself with the software and procedures.

GET STARTED – Prepare Connect Identify Check

PREPARE: Review clinical notes, last clinic letter, Haemtrack, HJHS, HAL
Open clinical files/ electronic records and results systems;

CONNECT: Ask “can you hear/ see me”.
Have patient’s contact details handy in case lose connection

IDENTIFY: Confirm patient’s identity Name, DOB

CHECK: “Where is the patient?” Ensure privacy (YOU and PATIENT) and parent present if call involves children
Establish what the patient wants from the call
Tell the patient what you will do during the call

MDT CLINIC MSK REVIEW

Confirm current treatment regime, dose

Ask patient to describe

- how they have been coping
- difficulties with ADL
- worries or concerns
- areas of pain
- bleeds since last review
- change in stiffness / swelling of joints

How are they keeping active?

Do you need any help/ assistance?

Do you feel well in yourself?

Is there anything I can do for you?

- USE PAST CLINICAL NOTES/ HJHS/ HAL/ HAEMTRACK etc. as PROMPTS
- IF POSSIBLE ASK PATIENT TO DEMONSTRATE ANY CHANGES OR DIFFICULTIES

TRIAGE REVIEW

Ask patient to describe

- Joint or area of body affected
- How long for - getting worse or staying the same
- Mechanism of bleed/ injury – what did you do about it?
- PAIN: where, type, constant or intermittent, at rest, during movement (out of 10), “is it keeping you awake?” “does it interfere with play, or doing things?”
- What makes it worse, does anything make it easier?
- SWELLING: where, and loss of bony landmarks
- MOVEMENT: “Can you move/bend the part?” “Is it less than usual?” “Can you weight-bear on it?”
 - Compare left and right sides – “how does it look different to the same area on the other side?” size, shape, position, colour, hot, movement
 - IF POSSIBLE ASK PATIENT TO SHOW YOU
 - Any changes to the sensation/ feeling in the body part?
 - How long since your last treatment?
 - When did you last bleed into this joint/ muscle?
 - Do you need any help/ assistance?
 - Do you feel well in yourself?
 - Have you taken any analgesia? What and how much?

May need analgesia, ADL and exercise advice

IDENTIFY VULNERABLE PATIENT THAT MIGHT NEED FURTHER REVIEW, REFERRAL OR FOLLOW-UP

Lives alone, anxious, multi-joint arthropathy, worsening function and pain, non-responding bleed, fall, head or mouth trauma

MAY NEED SUPPORT FOR WELL-BEING

If suspect a bleed

- Follow local treatment guidelines and advice
- Advise patient to rest and apply PRICE for 48 hours
- Arrange follow-up call if needed

**ASK ABOUT COVID-19 SYMPTOMS:
FEVER, DRY COUGH, FATIGUE, SHORTNESS OF BREATH**