



MANAGEMENT SURVEY TOOLKIT

Aim

1. To assess current practice in terms of use of non-invasive management technique options and cement augmentation techniques for osteoporotic vertebral compression fractures within neurosurgical and orthopaedic units.

Objective

- 1. Collect data regarding management osteoporotic vertebral compression fractures in terms of non-invasive management technique options and cement augmentation techniques using current guidance from NICE.
- 2. Local data to be submitted centrally to be analysed on a regional and national level.

Methods

Data Collection Periods:

Prospective data collection: November 1st – December 5th

Data Collection:

- 1. The trainee collaborator shall be responsible for collecting the survey responses from as many spinal consultant surgeons (orthopaedic or neurosurgeons) working within the unit as possible (minimum 2)
- 2. Standardised, Google form. No patient identifiable data will be collected. Google form available here: https://forms.gle/gTGKQzGur7mriuFS6

Local registration

The project does not require local registration or ethical approval as no patient data or patient surveys are being undertaken.

Analysis

- 1. Following completion of the data collection, data from local institutions will be compiled and analysed on a regional and national level. This analysis will identify variation in practice and compliance against NICE Guidelines.
- 2. It will provide a snapshot of the current non-operative practice of orthopaedic surgeons and neurosurgeons when treating patients who sustain osteoporotic vertebral compression fractures
- 3. Local analysis will provide individual institution level compliance against the standard, and a snapshot of the current practice within that institution.

Presentation

- 1. Following analysis, a data summary of the findings will be made available to all contributing institutions.
- 2. Local presentation is recommended. Results shall be presented at regional and national orthopaedic meetings to ensure wider dissemination of the results.

Recommendations

Subsequent recommendations for change of practice will be made to improve compliance, clinical management and develop further research questions where necessary.

Costs

No local costs should be incurred through the routine collection of audit data against national standards.