Impact of Same-Day Physical Therapy on Case Length of Musculoskeletal Injuries

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Introduction

Musculoskeletal disorders are a significant cause of workplace injuries, leading to substantial economic and productivity losses

- ➢ 502,380 cases in 2021-2022, leading to at least one day away from work¹
- Annual incidence rate of 25.3 per 10,000 full-time equivalent (FTE) workers¹
- > \$167 billion in total costs in 2021 (wages, medical expenses, administrative costs)²
- > Delays in treating musculoskeletal injuries result in higher costs and longer recovery times

Objective

> To assess the effect of same-day PT on reducing the total case length of musculoskeletal injuries in cases not requiring orthopedic referrals

Methods



References

- 1. U.S. Bureau of Labor Statistics. (2022). Employer-reported workplace injuries and illnesses 2021. U.S. Department of Labor. https://www.bls.gov/news.release/pdf/osh.pdf
- 2. National Safety Council. (n.d.). *Work injury costs*. Injury Facts. <u>https://injuryfacts.nsc.org/work/costs/work-injury-costs/</u>
- 3. Peterson, C., Xu, L., & Barnett, S. B. L. (2021). Average lost work productivity due to non-fatal injuries by type in the USA. Injury prevention: journal of the International Society for Child and Adolescent Injury Prevention, 27(2), 111–117. https://doi.org/10.1136/injuryprev-2019-043607

Study Demographics

	All	Physical Therapy	
		Delayed	Same Day
Ν	1,772	1,625	147
Age (mean)	40.7	40.6	42.3
Age Range	17-83	17-83	18-69



- **Cost Effectiveness**:
- per lost workday)

Cervical Spine

Lumbar Spine

Thoracic Spine

Shoulder

Forearm

Knee/Lower leg

Wrist/Hand

Ankle/Foot

- Residency Program
- 2T03OH008628-20-00

Results

Mean Case Length & 95% Confidence Interval (CI)

> **Delayed PT**: 23 days, 95% CI: 22-24

Same-Day PT: 17 days, 95% CI: 15-20

> Same-day PT showed a **statistically significant** reduction in case length adjusted for age and body part affected compared to delayed PT (*p=.0005*)

> Mean decrease in case length: 6 days

> Average savings per patient due to reduced lost workdays: **\$1,110.42** (based on 2024 inflation-adjusted value of \$185.07³



* ANCOVA adjusted for age conducted using log 10 transformation of case length. Values are presented as the anti-log. No statistically significant differences in case length found within body part affected, but over difference between PT type remains significantly different.

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Discussion

- Same-day PT significantly reduced the overall case length for musculoskeletal injuries compared to delayed PT adjusted for age and body part affected > Average savings may be up to \$1,110.42 (6 lost workdays)
- > Significant cost savings can provide an incentive for employers and insurance companies to prioritize early intervention

Limitations

- Same-day PT period was short (3 months) and during the holiday season, which resulted in small sample size and possible delay in PT due to holiday
- Before & after study design as opposed to concurrent control group, may have introduced bias toward shorter case length in the same-day PT
- Individuals may have received same-day PT regardless of immediate clinical need; however,
- this was mitigated by performing PT for those requiring work restrictions
- > The cost of PT may outweigh the reduction in case duration, limiting its practical or financial viability > Limitations in data consistency and different clinician treatment methods across multiple clinics may have
- introduced some variability in the results
- > However, patients were not selectively chosen but included from all cases; the variability should have been evenly distributed and non-differential

Conclusions

- Same-day PT suggests a reduction in the case length for musculoskeletal injuries, with an average decrease of 6 days compared to delayed PT
- > Cervical and lumbar spine injuries showed the largest decrease in case length by 12 & 10 days, respectively
- > Early integration of physical therapy on musculoskeletal injuries enhances blood flow and tissue healing decreasing pain, aiding faster recovery and quicker return to work
- > Larger studies with a concurrent control group, aimed at identifying types of injuries and patients that would benefit both the worker and employer should be considered