

**Back manipulation by physiotherapist
in presence of intervertebral disc injury
(01HDC03073, 25 October 2002)**

*Physiotherapist ~ Acute sciatica ~ Standard of care ~ Sufficient information ~
Rights 4(1), 6(1)(b)*

A 51-year-old man complained about the standard of treatment he received from a physiotherapist he consulted about a pinched nerve in his lower back. The complaint alleged that the physiotherapist failed to: (1) adequately assess the man's injury or symptoms; (2) relieve the pain of the pinched nerve in his lower back; (3) advise him why his spine was "cracked", as he felt he was given insufficient explanation about the treatment prior to commencement; (4) advise him that in order not to exacerbate his condition, he should lie down and refrain from sitting up once at home; (5) enquire or provide any follow-up care or advice after the treatment; and (6) adequately treat his condition, as he was worse off following the treatment.

An independent physiotherapist advised that a patient should be given a detailed interview to establish the history of the complaint, the nature of the pain, whether the pain was behaving in a chemical or mechanical way, past history, and questions about safety issues, medications, pins and needles, numbness, etc, that might indicate a more serious pathology. While the physical examination may be brief if the patient is in considerable pain, prompt treatment should not be at the expense of a careful and considered approach; therefore the physical examination should still cover active range of movement, relevant passive movement tests to appropriate joints, and special tests such as straight leg raise, and strength and sensation testing of the lower limb to ascertain the status of the disc and the surrounding nerve tissue.

There was a strong possibility of a causal link between the treatment provided by the physiotherapist and the worsening of the patient's symptoms. It was held that the physiotherapist:

- 1 breached Right 4(1) by failing to provide the patient with an appropriately detailed interview or physical assessment of his injury prior to treatment, or with appropriate treatment for his condition; and
- 2 breached Right 6(1)(b) by not sufficiently discussing the proposed treatment, as the patient was not actively involved in any goal setting with regard to his treatment, nor was he clearly informed of his treatment options and outcomes.

The Commissioner commented on the brevity and inadequacy of the physiotherapist's clinical notes, and reminded him of the importance of comprehensive and accurate documentation.