

**Conclusion** Patient satisfaction is not commonly reported in tendinopathy research, and in those studies where it is reported, satisfaction and GROC appear similar and are ranked moderately high demonstrating patients generally perceive exercise therapy for tendinopathy positively. Further research investigating satisfaction and GROC is required to identify moderating factors and improve patient-centred care.

**27** 'IT'S SECOND BEST': MIXED-METHODS EVALUATION OF THE EXPERIENCES OF PEOPLE WITH MUSCULOSKELETAL PAIN TOWARDS PHYSIOTHERAPIST DELIVERED TELEHEALTH DURING COVID-19 PANDEMIC

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**Introduction** Telehealth was rapidly adopted in musculoskeletal physiotherapy practice during the COVID-19 pandemic, providing a unique opportunity to evaluate the experiences and attitudes of people would not usually engage with these services.

**Materials and Methods** A sequential mixed-methods study recruited people with musculoskeletal pain conditions accessing private practice physiotherapist services in Australia. Participants completed an online survey of telehealth services accessed, treatments, self-reported global change in condition, and attitudes toward telehealth. A subset of survey participants completed semi-structured interviews to explore experiences and attitudes towards telehealth. Data was summarized descriptively (quantitative), analyzed using inductive thematic analysis (qualitative), and integrated facilitating deeper understanding.

**Results** 172 participants responded to the survey and 19 were interviewed. 95% accessed video-based telehealth, typically via zoom; and 85% reported improvement in their condition. 84% agreed it was an efficient use of time, 75% agreed it was financially viable, and 73% agreed their condition was accurately diagnosed. 62% percent believed telehealth should be less expensive than face-to-face services. Qualitative analysis revealed four themes (17 subthemes), including (i) value of telehealth; (ii) challenges; (iii) advantages; and (iv) use of technology to support patient experience.

**Conclusion** Australians with musculoskeletal pain conditions accessing physiotherapy via telehealth during the COVID-19 pandemic felt this care was valuable, although less so than traditional face-to-face care. Key challenges included the perception that lack of physical contact prevented accurate assessment, diagnosis and 'hands on' treatment, and requirements for technology to facilitate a quality

service. Advantages included access to expert care and convenience.

**29** MANAGING SERIOUS PATHOLOGY IN LOW BACK PAIN: DEVELOPMENT AND VALIDATION OF A BAYESIAN NETWORK DECISION SUPPORT TOOL

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**Introduction** A key decision for assessment of Low back pain (LBP) is identifying serious underlying conditions such as Cauda Equina Syndrome, infection, fracture or space-occupying lesions. Previous decision support tools for LBP deployed rule-based recommendations, yet Artificial Intelligence has enabled 'intelligent' decision support tools, with Bayesian Networks particularly suitable for complex conditions such as LBP. This study aimed to test whether clinical knowledge could be elicited to construct a Bayesian Network to support clinicians' detection of serious pathology masquerading as LBP.

**Methods** A modified-RAND appropriateness procedure elicited knowledge from 16 domain experts from General Practice, Rheumatology and Musculoskeletal specialties. This comprised a four-stage process using bespoke online tools interleaved with face-to-face meetings; 1) Variable elicitation, 2) Structure elicitation, 3) Probability elicitation 4) Validation. Independent experts in spinal pathology reviewed the initial tool and its outputs.

**Results** The tool includes background risk factors (e.g. trauma, age), signs and symptoms (e.g. bladder disturbance, inflammatory symptoms) and derived judgement factors (e.g. cord compression, fracture). The tool has an interactive online interface, requiring real-time patient inputs from the subjective assessment, then gives a judgement comparing baseline to the current patient. Content validation suggested no missing elements to the model, but may require more detail for clinical understanding of terms. Face validation exposed some inconsistency in clinical reasoning, particularly for spinal infections and fractures.

**Conclusion** The structured elicitation method yielded a reasoning model using expert clinician knowledge, establishing consensus amongst participants about its content. Further iterations to expand this to common LBP presentations should follow.

**30** ONE HUNDRED CHILDREN AND ADOLESCENTS CONSULTING GENERAL PRACTICE WITH MUSCULOSKELETAL PAIN

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**Introduction** Each year, 8% of children and adolescents consult their general practitioner (GP) due to musculoskeletal conditions, with pain the most frequent symptom. There is