

### Background

According to a systematic review by *Steel A et al.*, evidence from random controlled trials suggests that osteopathyrelated interventions are effective in improving outcomes in patients with musculoskeletal pain, pulmonary disease, gastrointestinal disorders and various pediatric conditions [1]. There was also a cost-utility analysis that reported improved pain and quality of life in patients with neck or back pain at a cost of \$4900 US dollars (approximate conversion of currency from Euros to US dollars) per quality-adjusted life year gained [1].

Few providers in the community of McAlester, Oklahoma offer Osteopathic Manipulation Treatment (OMT). This is consistent with findings from a recent study [2]: the use of OMT is declining across the United States; out of 10,000 surveyed osteopathic physicians, only about 16% responded and only about 77% of those respondents reported that they used OMT for their patients. Our Family Medicine Residency Clinic is unique in that we do provide these services, and we can care for the niche of patients who would greatly benefit from osteopathic manipulative therapies.

## Aim Statement

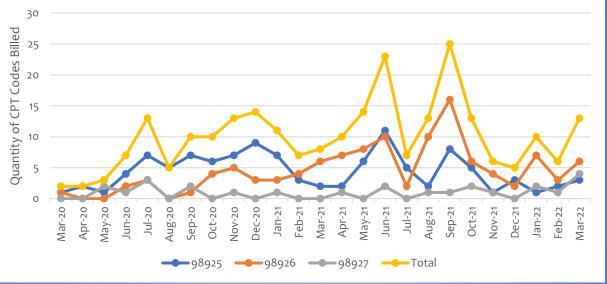
My goal was to increase clinic OMT visits at the MRHC Family Medicine Residency Clinic by developing effective patient education materials to be distributed to patients. Overall, the purpose was to observe whether or not providing educational material increases the number of patients having OMT.

## Methods

Brochures with easy-to-read education about OMT were created and offered to patients. Distribution began in April 2021. Monthly reports of the quantity of CPT codes for OMT visits billed at the Family Medicine Residency Clinic were collected from March 2020 to March 2022. This data was graphed over time to demonstrate trends in the quantity of OMT visits before and after distribution of the educational material. Promoting Osteopathic Manipulative Treatment Services in the Clinic Setting Author: Mai T. Murphy, D.O., PGY-3 Faculty advisor: Vanessa L. Meuniot, D.O. McAlester Regional Health Center Family Medicine Residency Program and Oklahoma State University College of Osteopathic Medicine

## Results

OMT CPT codes billed at the MRHC Family Medicine Residency Clinic from March 2020 through March 2022



# OMT Brochure [3,4]

<text><text></text></text>	<section-header><text><text><text><text><text><text></text></text></text></text></text></text></section-header>	Southeast Clinic Family Medicine Sectors Reducine two: metarthermatics Reducine TearNett Court	<section-header><text><text><list-item><list-item><list-item><list-item><list-item><list-item><list-item><list-item><list-item><list-item></list-item></list-item></list-item></list-item></list-item></list-item></list-item></list-item></list-item></list-item></text></text></section-header>	<section-header><text><text><text><text></text></text></text></text></section-header>	<section-header><text><text><text><text><text><text><text><text></text></text></text></text></text></text></text></text></section-header>
----------------------------	---	--	---	---	---



## Limitations

- The comfort of providing OMT are variable amongst each physician provider.
- The number of OMT procedures are affected by clinic closings/holidays.
- Data is limited to only two years and this study has not been conducted long enough to see the overall effect of providing brochures.
- Not all clinic providers were distributing OMT brochures to their patients.
- Not all patients are literate.
- Transportation difficulties could affect the frequency of visits.
- The variability amongst insurance coverage of OMT services could affect the likelihood of patients choosing to have manipulation treatment.

#### Conclusion

- Providing OMT brochures to patients has potential to increase the number of OMT visits in the clinic.
- There is a positive trend, however at this time it is not statistically significant. My belief is overtime there will be a measurable change.
- With this information, future quality improvement projects can make changes or add to the available educational material in an effort to capture more OMT visits in the clinic.

## Moving Forward ...

- We may create a survey to assess patient understanding and awareness after receiving additional educational materials.
- We can also create a survey to assess why the patient did or did not chose to have OMT, and to assess what information patients would like to have prior to making the decision to pursue OMT.

## Bibliography

- Steel A, Sundberg T, Reid R, et al. Osteopathic manipulative treatment: A systematic review and critical appraisal of comparative effectiveness and health economics research. *Musculoskeletal Science and Practice*. 2017;27:165-175. doi:10.1016/j.math.2016.10.067
- Healy, Colson J., Brockway, Matthew D. and Wilde, Benjamin B.. "Osteopathic manipulative treatment (OMT) use among osteopathic physicians in the United States" *Journal of Osteopathic Medicine*, vol. 121, no. 1, 2021, pp. 57-61. <u>https://doi.org/10.1515/jom-2020-0013</u>
- Nelson KE, Glonek T, eds. Somatic Dysfunction in Osteopathic Family Medicine. Second ed. Philadelphia, PA: Wolters Kluwer/Lippincott Williams & Wilkins Health; 2015.
- 4. American Osteopathic Association Website. Osteopathic.org

٠

٠