

Title:

Informed Decisions and Patient Outcomes: An Interdisciplinary Approach to Chronic Hip Pain.

NCT03519087

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Data Analysis Plan

Primary outcome measures:

1. Treatment plan

Chi-squared test will be used to compare the distribution of participants who included physical therapy in their post-evaluation treatment plan in the interdisciplinary group compared to the standard group ($P \leq 0.05$).

2. Decisional conflict

A Mann-Whitney U test will be used to compare post-evaluation decisional conflict between the interdisciplinary and standard groups ($P \leq 0.05$).

Secondary outcome measures:

1. Changes in provider protocol opinions

A single-rater will evaluate qualitative interviews of providers to quantify the number of responses within the following pre-determined themes: implementation, physical therapy evaluation, time, patient response, clinical reasoning, environment.

2. Participant protocol opinions

Participants did not participate in qualitative interviews due to resource limitations.

3. Decisional conflict (x4 weeks)

Evaluation of any changes in decisional conflict over the 3-week intervention period will be limited by small sample size. Descriptive statistics may be reported for those who received or did not receive posture and movement training.

4. Patient-reported hip function (x4 weeks)

Evaluation of any changes in patient-reported hip function over the 3-week intervention period will be limited by small sample size. Descriptive statistics may be reported for those who received or did not receive posture and movement training.

5. Movement mechanics

Evaluation of any changes in kinematics or kinetics over the 3-week intervention period will be limited by small sample size. Analysis of these data were not completed due to stoppage of funding and limited personnel.

6. Decisional regret

Decisional regret was collected but will not be analyzed due to lack of construct validity.

7. Hip strength

Evaluation of any changes in hip strength over the 3-week intervention period will be limited by small sample size. Descriptive statistics may be reported for those who received or did not receive posture and movement training.