





Return to Employment After Carpal Tunnel Release Surgery (REACTS):

A Survey of UK Clinical Practice

The answers given are anonymous. Individual replies will only be seen by the study team.

SERIAL NO:



Participant Information Sheet

REACTS: Return to employment after carpal tunnel release surgery – a survey of UK clinical practice

What is the research about?

We would like to invite you to take part in a survey exploring return to work after carpal tunnel release. This study is part of an NIHR-funded programme of research investigating return to work after carpal tunnel release surgery. The aim of this survey is to describe current UK clinical practice and it involves questions about your usual management of carpal tunnel release patients.

Why have you been chosen?

You have been invited to participate as a surgeon who may treat this patient population. If you do not routinely perform carpal tunnel release surgery, we would still like you to respond to section one.

What will participation involve?

This is a one-off survey with a maximum of 17 questions. Completion of the questionnaire is expected to take approximately five minutes, although some questions may not be relevant to your practice. There are no right or wrong answers to this survey and no trick questions.

Participation is voluntary, and you are under no obligation to take part. You are free to withdraw at any point prior to returning the questionnaire.

Anonymity and confidentiality

The survey is anonymous; we do not ask for any identifying information. In accordance with the UK Data Protection Act (1998), all data will be kept confidential, used only for research purposes and shared only with the research team. Data will be stored electronically on a password protected, encrypted computer and hard copies of the survey will be stored in a locked filing cabinet.

Study findings

The survey findings will be shared with UK professional bodies, including: British Society for Surgery of the Hand, Association of Surgeons in Primary Care, Reconstructive Surgical Trials Network and British Association of Hand Therapists. If you would like to be directly notified of the study findings, please contact Lisa Newington using the details below.

Funding and approval

This study has been approved by the University of Southampton Ethics Committee (ERGO 20993) and is funded by the National Institute for Health Research (DRF-2015-08-056).

Contact details

If you have any questions about this survey, please do not hesitate to contact the lead researcher: Lisa Newington | In@mrc.soton.ac.uk | 023 8077 7624.

In the unlikely event of a concern or complaint, please contact the Research Governance Office: rgoinfo@soton.ac.uk | 023 8059 5058.

The research supervisors are Professor David Warwick, Professor Jo Adams and Professor Karen Walker-Bone at the University of Southampton.

Se	Section 1 Background Information							
1.	Please indicate your (Please tick one box)	clinical grade						
a)	Consultant	b) General practitioner	c)	Associate specialist /staff grade				
d)	Specialist registrar	e) Other (please specify)						
2.	Please indicate your (Please select all that							
a)	Primary care	b) Orthopaedics	c)	Plastics				
d)	Hand surgery	e) Other (please specify)						
3.	Please indicate when (Please tick one box)	e you predominantly w	ork					
a)	England	b) Wales	c)	Scotland				
d)	Northern Ireland	e) Ireland	f)	Other (please specify)				
 Approximately how many elective carpal tunnel release procedures did you perform 4. in the last 12 months? (Please tick one box) 								
a)	None	b) 1-10	c)	11-30				
d)	31-70	e) 71-100	f)	>100				
	If you answered a) None to the above question, thank you for completing the questionnaire; please turn to the last page.							

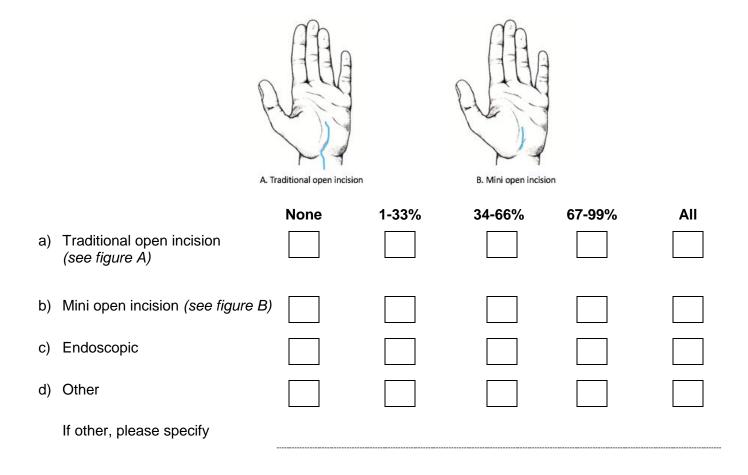
Section 2 Elective Carpal Tunnel Release Procedures

Of all the elective carpal tunnel releases you performed in the past 12 months, approximately what proportion were carried out in each of the following settings? (*Please tick one box for each setting*)

a)	NHS tertiary care (specialist hand/upper limb unit)	None	1-33%	34-66%	67-99%	
b)	NHS secondary care					
c)	NHS primary care					
d)	Private practice					
e)	Other					
	If other, please specify					

Thinking about all the elective carpal tunnel releases you performed in the last 12

6. months, which surgical procedures did you use? (Please tick the approximate proportion of patients treated with each method)



Section 2 Elective Carpal Tunnel Release Procedures

 Of these patients, approximately what proportion had the following pre-operative nerve conduction study results for their affected hand(s)? (Please tick one box for each nerve conduction study scenario) 								
		None	1-33%	34-66%	67-99%	All	Unsure	
'	d not have nerve conduction udies							
,	onormal nerve conduction udies							
c) No	ormal nerve conduction studies							
8.	 8. Thinking about all the carpal tunnel releases you performed in the last 12 months, approximately what proportion of patients had the following non-operative treatments before their surgery? (Please tick one box for each treatment) 							
		None	1-33%	34-66%	67-99%	All	Unsure	
a) St	eroid injection(s)							
b) Pı	ovision of a splint							
	and therapy / physiotherapy / ccupational therapy							
9a.	What is your usual follow- patients <u>treated in the NHS</u> (Please tick and record the a	<u>S</u> ?		-		-		
							Days	
a)	Reviewed by you personally							
b)	b) Telephone follow-up by you personally							
c) Reviewed by another member of the surgical team								
d)	d) Followed up in a dressings clinic							
e)	Followed up in primary care] [
f)	Followed up by therapist] [
g)	Followed up by occupational he	ealth profe	essional] [

- h) No planned follow-up
- i) Other (please specify)

Section 2 Elective Carpal Tunnel Release Procedures

9b.	What is your usual follow- patients <u>treated privately</u> ? (Please record approximate	,	·		tive carpal tu	nnel rel	ease
			,	/		Days	
a)	Reviewed by you personally						
b)	Telephone follow-up by you pe	rsonally					
c)	Reviewed by another member	of the surgical tea	am				
d)	Followed up in a dressings clin	ic					
e)	Followed up in primary care						
f)	Followed up by therapist						
g)	Followed up by occupational he	ealth professional					
h)	No planned follow-up						
i)	Other (please specify)						
10a.	How do you manage patier and require carpal tunnel r (Please tick one box)	-	it with bilat	teral c	arpal tunnel	syndron	ne
a)	l always recommend bilateral s	imultaneous carp	al tunnel rel	ease (g	o to Q11)		
b)	I never recommend bilateral sir	nultaneous carpa	l tunnel relea	ase (go	o to Q11)		
C)	I recommend bilateral simultan	eous carpal tunne	el release in	some i	nstances		
	If you recommend bilateral	carnal tunnel r	alaasa in s	ome i	nstances (an	swer C	
10b.	above), which factors migh	-					gery?
	(Please tick all that apply)						
a)		e of general		c)	Severe sympt	oms	\square
d)		aesthetic f-funding		f)	Need to minin	nise	
,		J		,	work absence	÷	
g)	Other (please specify)						
11.	In the past 12 months have	· ·	-			leases f	or
	patients who were employe	d or self-emplo	byed at the	time o	of surgery?		
	a) Yes	b)	No				
	If you answered b) No to the	e above questi	on, thank y	/ou foi	r completing	the	

questionnaire; please turn to the last page.

Section 3 Carpal Tunnel Release and Work

12. Thinking about your patients in the last 12 months who were employed or selfemployed at the time of their carpal tunnel release:

12a. What proportion were issued with a fit note by you personally? (*Please tick one box*)

		None	1-33%	34-66%	67-99%	All	Unsure		
What proportion were given advice on returning to work (by you or any member of 12b. your team) at each of the following time points? (Please tick one box per time point)									
		None	1-33%	34-66%	67-99%	All	Unsure		
a)	Pre-operatively								
b) /	At the time of surgery								
c)	Post-operatively								
12c.	If patients were given ad (Please tick all that apply)		return to	o work, wh	o provided	this advi	ce?		
a)	You personally	b) Another r surgical t		the	c) Hospit	al nurse			
d)	GP or primary care	e) Specialis therapist	t hand			physiothera ational ther			
g)	Occupational health professional	h) No advic	e given		i) Other	(please sp	ecify)		
For the following roles, what do you consider the earliest time point that someone 13. could return to work following carpal tunnel release?									
	(Please give an approxin		-		rk type)	_			
_ \			· · · · ·				ays		
a)	Desk-based duties (e.g. ke	yboard, mous	se, writing,	telephone)					

- b) Repetitive light manual duties (e.g. driving, delivery, stacking)
- c) Heavy manual duties (e.g. construction)

In the past 12 months have you ever advised a patient to return to work following 14. carpal tunnel release even if they were unable to perform all their usual occupational tasks?

a) Yes

b) No

Section 3 Carpal Tunnel Release and Work

What do you recommend for patients returning to work after carpal tunnel release?

15. (Please think about the timescales for returning to different activities, including anything you specifically advise your patients to avoid)

When framing your advice about return to work after carpal tunnel release for individual patients, do you tailor your advice in any way according to the following factors?

(Please tick one box for each factor)

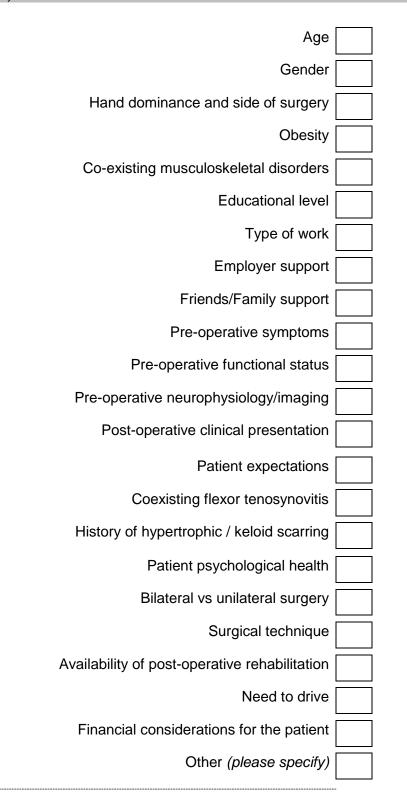
16.

	Yes	No
Age		
Gender		
Hand dominance and side of surgery		
Obesity		
Co-existing musculoskeletal disorders		
Educational level		
Type of work		
Employer support		
Friends / family support		
Pre-operative symptoms		
Pre-operative functional status		
Pre-operative neurophysiology / imaging		
Post-operative clinical presentation		
Patient expectations		
Coexisting flexor tenosynovitis		
History of hypertrophic / keloid scarring		
Patient psychological health		
Bilateral vs unilateral surgery		
Surgical technique		
Availability of post-operative rehabilitation		
Need to drive		
Financial considerations for the patient		
Other (please specify)		

Section 3 Carpal Tunnel Release and Work

Of these factors, please select the <u>three</u> you consider most influential for return to work after carpal tunnel release.

17. (Please write 1 for the most important, 2 for the second and 3 for the third. You do not need to rank the whole list)



Medicine







Thank you for your interest in our research

Thank you for taking the time to complete our survey. If you would like to be notified of the survey findings, or have any questions about the study, please contact the research lead:

Lisa Newington | In@mrc.soton.ac.uk | 023 8077 7624

This survey is also available electronically at: www.isurvey.soton.ac.uk/19892