OMB CONTROL NUMBER: 0720-PBRD OMB EXPIRATION DATE: XX/XX/XXXX

AGENCY DISCLOSURE NOTICE

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Privacy Advisory

Information is being collected for this Survey under authorities cited in the publicly available EDHA 08, Defense Health Agency Survey and Study Data Base (July 28, 2014; 79 FR 43727) and EDHA 07, Military Health Information System (June 15, 2020; 85 FR 36190), and will be used for a doctoral research project and dissertation. The goal of this Survey is to describe provider beliefs regarding the maximum deadlift (MDL) event and their relationship to treatment behaviors for patients presenting with a deadlift injury. You will be asked to provide your demographic information (e.g., age, sex, military service status, specialty, duty and unit locations, facility and unit types), and information related to your experiences with back pain and activities. Individual Survey results will not be published. Completing this Survey is voluntary. Maximum participation is encouraged so the data will be complete and representative, but you may stop the Survey at any time and skip any questions you choose. There is no penalty if you decide not to respond.

Help Us Improve Soldier Readiness and Care – 10-minute survey

The Army Fitness Test (formerly the Army Combat Fitness Test) includes the three-repetition maximum deadlift (MDL) as a core event. As medical providers and Army leaders, we share a responsibility to maximize Soldier resiliency and safety during MDL testing.

We are conducting a <u>brief, one-time survey</u> to better understand how healthcare providers view and manage the deadlift in the context of Soldier care. Your input will directly support efforts to enhance medical guidance, optimize readiness, and inform evidence-based practices.

Estimated time: ~10 minutes

Content: Demographics, a brief case scenario, clinical perspectives, and personal experiences with back pain and deadlifts

Confidentiality: Responses are anonymous and coded to prevent participant identification

IRB Approved: Naval Medical Center Portsmouth

Your participation is vital to shaping clinical decision-making that impacts Soldier health and performance. If you do not wish to participate, please disregard this message. If you proceed to the survey and agree to the consent statement, your participation will be confirmed.

Thank you for considering this opportunity to contribute to military medicine and readiness!

Patient Demographic Information

Demographic Information					
Question / Item	Proposed Responses				
0.1.Cover Letter/Consent (Qualtrics Survey Landing Page) (SHOWN ABOVE)	 I have read the informed consent document and <u>AGREE</u> to participate in the survey. I have read the informed consent document and <u>DECLINE</u> to participate in the survey. 				
1. Please enter your age (in years).	[TEXT BOX BLANK]				
2. Please select your sex.	- Male - Female				
3. Please select your military service status (as a healthcare provider).	- Army – Active Duty - Army – Reserves - Army – National Guard - Civilian – GS employee - Civilian – Contractor				

4. Please select the state or region where you are currently stationed.

Active Duty or Civilian (GS / Contractor): Your current duty location

Army Reserve / National Guard (do not practice as a GS/CTR in a military setting): Your unit's duty location

Army Reserve / National Guard (also currently practice as a GS/CTR in a military setting): Your primary duty location for providing Soldier care

- Alabama
- Alaska
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- Florida
- Georgia
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi
- Missouri
- Montana
- Nebraska
- Nevada
- New Hampshire
- New Jersey
- New Mexico
- New York
- North Carolina
- North Dakota
- Ohio
- Oklahoma
- Oregon
- Pennsylvania
- Rhode Island

	T				
	- South Carolina				
	- South Dakota				
	- Tennessee				
	- Texas				
	- Utah				
	- Vermont				
	- Virginia				
	- Washington				
	- West Virginia				
	- Wisconsin				
	- Wyoming				
	- North America (includes Central America,				
	Caribbean)				
	- South America				
	- Europe				
	- Africa				
	- Middle East				
	- Asia				
	- Australia / Oceania				
5. Please select your healthcare provider	- Occupational Therapist				
specialty.	- Physical Therapist				
	- Certified Athletic Trainer				
	- Strength & Conditioning Coach				
	- Nurse Practitioner				
	- Physician Assistant/Associate (Non-Orthopedic)				
	- Physician				
	- Orthopedic Physician Assistant/Associate				
	- Orthopedic Surgeon				
6. Please enter how many years you have been					
practicing as a licensed professional in your	[TEXT BOX BLANK – 4, 6, 12, 28, etc]				
specialty (whole numbers only).	[12/(120/(22/44)(1/4/24)				
7. Please select the type of unit or healthcare	- Medical Treatment Facility (MTF) – Hospital or				
facility setting in which you work.	Outpatient Clinic				
lability setting in which you work.	- Operational Unit Holistic Health & Fitness				
	(H2F) Team				
	- Operational Unit – Non-H2F Personnel				
	- Other / Non-Operational (Education/Training,				
	Special Staff/Administrative)				
** BLOCK CHANGE TO	CLINICAL VIGNETTE **				
** BLOCK CHANGE TO BACK-PAQ-10 **					
** BLOCK CHANGE TO PABS-PT **					
** BLOCK CHANGE TO DL-5 **					
20. Are you currently experiencing an episode of	- No				
back pain that limits or disturbs your activities?	- Yes				
21. Have you experienced an episode of back	- No				
pain within the past 6 months that limited or	- Yes				
disturbed your activities?					
alotarboa your addividoo:	1				

22. Have you ever experienced back pain from deadlifting that limited or disturbed your activities?	- No - Yes
23. Do you currently perform deadlifts as part of your workout or exercise routine?	- No - Yes

Clinical Vignette and Patient Scenario-Based Questions

Clinical Scenario (adapted from Christe et al., 2021)

CASE SCENARIO (5 questions):

A 25-year-old active-duty soldier has been suffering from his first episode of low back pain since deadlifting 205 lbs at the gym 3 weeks ago. He says he has difficulty doing his job as a wheeled mechanic and has not performed regular vehicle maintenance tasks since the pain began. He is concerned to go back to repairing vehicles and feels significantly limited by the pain. The demands of his job are variable, but involve lifting and standing in a flexed position for extended periods of time. In terms of activities, he says he can sit for about 15 minutes and walk 200 meters before the pain limits him. He has difficulty falling asleep at night, and his back is stiff for about 10 minutes in the morning.

There have been no serious injuries or illnesses. The pain ranges from 1-3/10 and is limited to the lower back without radiation. On physical examination there is a painful limitation of trunk flexion and pain with palpation in the left paraspinal region. The neurological examination is normal, and the pain does not worsen during a straight-leg raise (or Lasègue) test. The diagnosis is non-specific low back pain.

- 1. Until pain improves, I would recommend that this patient
- $_{\odot}$ Limits all physical activities $_{\odot}$ Limits activities to light exertion $_{\odot}$ Limits activities to moderate exertion $_{\odot}$

Avoids only painful activities \circ Does not limit any activities

- 2. Until pain improves, I would recommend that this patient
- o Remains on quarters
- Returns to limited duty with severe temporary profile restrictions

Returns to limited duty with moderate temporary profile restrictions \circ Returns to full duty with minimal temporary profile restrictions \circ

Returns to full duty without temporary profile restrictions

- 3. I would recommend that this patient o Rests
- in bed until pain completely disappears o Rest
- in bed until pain improves substantially o Rest
- in bed only when pain is severe o Avoids

resting in bed as much as possible o Avoids resting in bed entirely

- 4. For treatment, I propose as a first step:
- (several answers possible) o Manual therapy (massage,

mobilizations, manipulations) o Electrotherapy (TENS) or

heat pack o Stretching

- o Complementary techniques (acupuncture/dry needling, myofascial release, reflexology, etc)
- Progressive exercises (motor control, strengthening)

5. To avoid recurrent episodes, I would also suggest to the patient: (several answers possible) \circ

To be careful of his posture

- o To be careful to keep his back straight when carrying weights of more than 10 lbs
- $_{\odot}$ Trying to avoid carrying weights over 20 lbs $_{\odot}$ Gradually resume flexion and rotation of the back $_{\odot}$ Gradually resume deadlifting in his daily exercise regimen

Correct answers are in bold. Scoring is as follows:

For Questions 1-3: one of the correct answers had to be selected

For Question 4: the correct answer had to be selected with or without the selection of other answers

For Question 5: ONLY the correct answers could be selected to receive full credit

Back-PAQ 10-item questionnaire (Back-PAQ-10)

Please rate each statement.

Question / Item	Responses						
Question / Item	+2	+1	0	-1	-2		
These statements are about your own back:							
1. It is easy to injure your back.	FALSE	POSSIBLY FALSE	UNSURE	POSSIBLY TRUE	TRUE		
2. You could injure your back if you are not careful.	FALSE	POSSIBLY FALSE	UNSURE	POSSIBLY TRUE	TRUE		
These statements are about back	pain in gener	al:					
Back pain means that you have injured your back.	FALSE	POSSIBLY FALSE	UNSURE	POSSIBLY TRUE	TRUE		
4. A twinge in your back can be the first sign of a serious injury.	FALSE	POSSIBLY FALSE	UNSURE	POSSIBLY TRUE	TRUE		
These statements are about what	you should de	o if you have ba	ick pain:				
5. If you have back pain you should avoid exercise.	FALSE	POSSIBLY FALSE	UNSURE	POSSIBLY TRUE	TRUE		
<u>6</u> . If you have back pain you should try to stay active.	FALSE (<i>True</i>)	POSSIBLY FALSE (Poss. True)	UNSURE	POSSIBLY TRUE (Poss. False)	TRUE (False)		
These statements are about recov	ering from ba	ick pain:					
7. Focusing on things other than your back pain helps you recover from back pain.	FALSE (True)	POSSIBLY FALSE (Poss. True)	UNSURE	POSSIBLY TRUE (Poss. False)	TRUE (False)		
<u>8</u>. Expecting your back pain to get better helps you recover from back pain.	FALSE (<i>True</i>)	POSSIBLY FALSE (Poss. True)	UNSURE	POSSIBLY TRUE (Poss. False)	TRUE (False)		
9. Once you have had back pain there is always a weakness.	FALSE	POSSIBLY FALSE	UNSURE	POSSIBLY TRUE	TRUE		
10. There is a high chance that an episode of back pain will not resolve.	FALSE	POSSIBLY FALSE	UNSURE	POSSIBLY TRUE	TRUE		

Items 6-8 are reverse scored. Italicized font underneath represents answer that will generate scoring value at the top of the table (i.e., for Questions 6-8, True = +2, False = -2).

Pain Attitudes and Beliefs Scale for Physiotherapists (PABS-PT) - Biomedical Subscale

Please rate the following statements:

Ougation/Itam	Responses						
Question/Item	1	2	3	4	5	6	
Increased pain indicates new tissue damage or the spread of existing damage.	TOTALLY DISAGREE	LARGELY DISAGREE	DISAGREE TO SOME EXTENT	AGREE TO SOME EXTENT	LARGEL Y AGREE	TOTALL Y AGREE	
2. The severity of tissue damage determines the level of pain.	TOTALLY DISAGREE	LARGELY DISAGREE	DISAGREE TO SOME EXTENT	AGREE TO SOME EXTENT	LARGEL Y AGREE	TOTALL Y AGREE	
3. If treatment does not result in a reduction in back pain, there is high risk of severe restrictions in the long term.	TOTALLY DISAGREE	LARGELY DISAGREE	DISAGREE TO SOME EXTENT	AGREE TO SOME EXTENT	LARGEL Y AGREE	TOTALL Y AGREE	
4. Pain is the consequence of tissue damage.	TOTALLY DISAGREE	LARGELY DISAGREE	DISAGREE TO SOME EXTENT	AGREE TO SOME EXTENT	LARGEL Y AGREE	TOTALL Y AGREE	
5. If patients complain of pain during exercise and/or during physical activities, I worry that damage is being caused.	TOTALLY DISAGREE	LARGELY DISAGREE	DISAGREE TO SOME EXTENT	AGREE TO SOME EXTENT	LARGEL Y AGREE	TOTALL Y AGREE	
6. It is the task of the provider to remove the cause of back pain.	TOTALLY DISAGREE	LARGELY DISAGREE	DISAGREE TO SOME EXTENT	AGREE TO SOME EXTENT	LARGEL Y AGREE	TOTALL Y AGREE	
7. In the long run, patients with back pain have a higher risk of developing spinal impairments.	TOTALLY DISAGREE	LARGELY DISAGREE	DISAGREE TO SOME EXTENT	AGREE TO SOME EXTENT	LARGEL Y AGREE	TOTALL Y AGREE	
8. Reduction of daily physical exertion is a significant factor in treating back pain.	TOTALLY DISAGREE	LARGELY DISAGREE	DISAGREE TO SOME EXTENT	AGREE TO SOME EXTENT	LARGEL Y AGREE	TOTALL Y AGREE	
9. Not enough effort is made to find the underlying organic causes of back pain.	TOTALLY DISAGREE	LARGELY DISAGREE	DISAGREE TO SOME EXTENT	AGREE TO SOME EXTENT	LARGEL Y AGREE	TOTALL Y AGREE	
10. Patients with back pain should preferably practice only pain-free movements.	TOTALLY DISAGREE	LARGELY DISAGREE	DISAGREE TO SOME EXTENT	AGREE TO SOME EXTENT	LARGEL Y AGREE	TOTALL Y AGREE	

<u>Pain Attitudes and Beliefs Scale for Physiotherapists (PABS-PT) – Biopsychosocial Subscale</u> Please rate the following statements:

Question/Item	Responses						
Question/item	1	2	3	4	5	6	
Exercises that may be back straining should not be avoided during treatments.	TOTALLY DISAGREE	LARGELY DISAGREE	DISAGREE TO SOME EXTENT	AGREE TO SOME EXTENT	LARGEL Y AGREE	TOTALL Y AGREE	
2. Even if the pain has worsened, the intensity of the next treatment can be increased.	TOTALLY DISAGREE	LARGELY DISAGREE	DISAGREE TO SOME EXTENT	AGREE TO SOME EXTENT	LARGEL Y AGREE	TOTALL Y AGREE	
3. If activities of daily living cause more back pain, this is not dangerous.	TOTALLY DISAGREE	LARGELY DISAGREE	DISAGREE TO SOME EXTENT	AGREE TO SOME EXTENT	LARGEL Y AGREE	TOTALL Y AGREE	
4. A patient suffering from severe back pain will benefit from physical exercises.	TOTALLY DISAGREE	LARGELY DISAGREE	DISAGREE TO SOME EXTENT	AGREE TO SOME EXTENT	LARGEL Y AGREE	TOTALL Y AGREE	

Deadlift-5 (DL-5)

Please rate each statement.

Overtion / Itam	Responses						
Question / Item	+2	+1	0	-1	-2		
These statements are about deadlifts and deadlifting:							
It is easy to injure your back while deadlifting.	FALSE	POSSIBLY FALSE	UNSURE	POSSIBLY TRUE	TRUE		
(Vulnerability of the back)							
2. Back pain during the deadlift means that you have injured yourself. (Relationship between	FALSE	POSSIBLY FALSE	UNSURE	POSSIBLY TRUE	TRUE		
back pain and injury)							
3. If you have back pain you should avoid deadlifting.	FALSE	POSSIBLY FALSE	UNSURE	POSSIBLY TRUE	TRUE		
(Activity participation during back pain)							
4. Expecting your back pain to get better helps you to recover from a deadlift injury.	FALSE (<i>True</i>)	POSSIBLY FALSE (Poss. True)	UNSURE	POSSIBLY TRUE (Poss.	TRUE (<i>Fals</i> e)		
(Psychological influences on recovery)		,		False)			
5. Once you have had a deadlift injury there is always a weakness. (Prognosis of back pain)	FALSE	POSSIBLY FALSE	UNSURE	POSSIBLY TRUE	TRUE		

Italicized font will not be input into the online survey. It is only for reference of the construct being tested. Point values will not be listed on the online survey. They are only for reference. Item 4 is reverse scored (True = +2, False = -2).