

# Library and Knowledge Services case study

# *Library & Knowledge Service RJAH Orthopaedic Hospital NHS FT :* Correlation between early, mid and late Oxford Knee Scores following Total Knee Replacement

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## Reason for enquiry

*The Advanced Physiotherapy Practitioner has been working in clinic with Sports Injuries Consultants and has been seeing patients following total knee replacement postoperatively. She has always given Oxford Knee Scores (OKS) when these patients attended their post-op appointment at 6 weeks, 12 weeks and 12 months.*

*When she started working in another clinic and gave patients their first postoperative appointments between 6 and 12 weeks, the Consultants said that they did not collect OKS at that stage as it didn’t provide any useful information. The Advanced Physiotherapy Practitioner shared her experience with the Consultants i.e. OKS did show some patients were performing better than others, and perhaps the early OKS might predict a later OKS. They wanted to see the latest evidence on this topic and requested a literature search on “Is there a relationship between early (6 – 8 weeks post-op), mid (12 weeks post-op) and late (12 months post-op) Oxford Knee Scores following total knee replacement surgery?”*

## What the knowledge and library specialist did

*The Librarian (Judit Sami) carried out a thorough evidence search and delivered the references to answer the clinical query.*

# Impact of input from the library and knowledge service

*The search results have flagged up a gap in the evidence and this is a potential area that needs to be looked at.*

*“Brilliant service, saves me so much time. Thank you very much, really helpful.”*

## Immediate Impact

*The Advanced Physiotherapy Practitioner is writing a paper with Specialist Registrars, looking at the correlation between 12 weeks and 12 months postoperative OKS. The evidence search located relevant articles and provided a background for this study. For example, the results provided the minimal clinical difference range we would need to include.*

*“We can’t make changes to patient care without evidence and prior to gaining the evidence we need to know what has already been shown to be effective. This provides the background and foundation to research. This is what you have provided for us. Without a literature we cannot perform research.”*

## Probable future Impact:

*The search results generated a lot of ideas. Patient care could potentially be improved, and it can contribute to financial effectiveness.*

*Potentially, if at 12 weeks post-op a patient is doing well, they won’t need to be seen at 12 months post-op. This could save the hospital another appointment therefore save money, also could save the patient another potential hospital visit.*

*Evaluating early-stage OKS could also tell if a patient is struggling at 12 weeks post-op, they could be struggling at 12 months post-op as well, which could mean that they need to be provided with more support and longer physiotherapy treatment.*

*“We will be able to discharge those who don’t need support earlier and provide more care for those who need it.’*

## Submission by:

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## For further information on how you can get similar support contact your local NHS library and knowledge service.