Oklahoma State University College of Osteopathic Medicine Patient-Reported Outcomes of Firefighters Using Seven Health and Ability Questionnaires

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INTRODUCTION

Firefighting is a high-risk occupation with activities that frequently expose individuals to hazardous conditions, increasing the risk for injuries often with subsequent decreased quality of life. Specifically, a firefighter is injured every eight minutes. The high rate of injury negatively impacts fire departments with a large sum of compensation claims; \$5,168-34,000 per claim with a total of \$2.8-\$7.8 billion annually, which does not account for shift coverage costs. Patient-reported outcomes are a commonly used method to evaluate subjective health information and may be used by fire departments to identify the health status of firefighters and provide insight to promote their health. Our study is a novel analysis of firefighters self-reported health to potentially identify deficiencies and opportunities for health improvement.

OBJECTIVES

Our goal was to identify health statuses of firefighters at a local fire department through use of seven different PRO measures

METHODS	RES
Firefighters (n=35) were evaluated using Usi seven different self-reported health mo	
surveys to assess various physical	
capabilities and quality of life, adapted to dev	
online formats using Qualtrics online sti	
survey software. The questionnaires	
included were the Foot and Ankle Ability SF Measure (FAAM), Disablement in the lef	
Physically Active Scale (DPA), Nirschl Phase tot	
Rating Scale, Oswestry Low Back Disability of	
Index (ODI), Patient-Rated Tennis Elbow	
Evaluation (PRTEE), QuickDASH outcome (3/3	
measure, and the RAND-36 measure of 40% 40% 40% 40% 40% 40% 40% 40% 40% 40%	
questionnaires were administered once to star	
provide a snapshot of a suburban	
Oklahoma fire department.	
Dationt Ronartad Outcome Measure	Poculto
Patient-Reported Outcome Measure	RESUILS
Disablement in the Physically Active	Overall Score: 12.63 (Frequency of scores 2
Patient-Rated Tennis Elbow Evaluation	Left Arm Total Score: Right Arm Total Score
Nirschl Phase Rating Scale	Frequency of 'No stiff
Oswestry Disability Index	Mean: 3.97 (Possible: Frequency of score '0- Frequency of score '2
Foot and Ankle Ability Measure	Perceived Function Pe Deviation: 14.74
QuickDASH	Total Score: 15.06 (Po
RAND-36	Energy/Fatigue Mean

SULTS

ng the DPA, 14 of the 35 firefighters answered "slight, derate, or severe" for the pain and motion variables. The rall score found for the DPA was 12.63 with a standard viation of 11.51. Only two of the firefighters indicated no fness or soreness after activity on the Nirschl Phase Rating le. The firefighters mean rating for "energy/fatigue" via the 36 was 54.14 out of 100. For the PRTEE, the total score for the arm was 6.77 with a standard deviation of 13.91, and the al score for the right arm was 6.80 with a standard deviation 1.70. The frequency of minimal disability (0-20% disability) 5 91.4% (32/35 firefighters) via the ODI, and the other 8.6% 35 firefighters) answered as having moderate disability (21disability). The perceived function percentage reported by firefighters on the FAAM had a mean of 96.03 with a ndard deviation of 14.74. The QuickDASH total score for the fighters was 15.06 with a standard deviation of 5.04.

(Possible: 64), Standard Deviation: 11.51 2, 3, and 4 for pain and motion: 14/35 responses, 40%

: 6.77 (Possible: 100), Standard Deviation: 13.91 e: 6.80 (Possible: 100), Standard Deviation: 11.70

fness or soreness after activity': 2 responses, 5.7%

e: 50), Standard Deviation: 3.82 0-20%: Minimal Disability': 32/35 responses, 91.4% 21-40%: Moderate Disability': 3/35 responses, 8.6%

Percentage Mean: 96.03 (Possible: 100), Standard

ossible: 55), Standard Deviation: 5.04 n: 54.14 (Possible: 100), Standard Deviation: 17.93



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CONCLUSION

Firefighters generally had pain, impaired motion, and soreness as frequently reported symptoms, indicating areas in which interventions may be helpful. Incorporation of periodic health surveys into firefighter schedules can highlight present health issues, as well as intervention effectiveness by means of subjective health status reporting. By combining the health surveys with aerobic and core strength exercises, fire departments may be able to monitor and improve firefighter health.

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