

## **Standardizing Post-Injury Weightbearing Terminology: A Consensus of All Stakeholders**

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**Purpose:** Post-injury rehabilitation is a key aspect of the patient journey. There is increasing emphasis on early weightbearing after fracture surgery. However, there remains no standardized terminology for weightbearing instructions, meaning clinical care and research can be flawed if health-care providers and patients use different terminology/acronyms when prescribing or following post-injury rehabilitation instructions. Previous publications have confirmed variability in language used for weightbearing instructions.

**Methods:** A Nominal Group Exercise (Modified Delphi process) was conducted between major stakeholders in a UK practice involved in orthopaedic trauma rehabilitation, including the British Orthopaedic Association (with subspecialty societies), Chartered Society of Physiotherapists, Royal College of Occupation Therapists, British Geriatric Society, Royal College of Nursing, NHS (National Health Service) England, and patient representatives. Each confirming stakeholder individual was able to represent their society or organization. An initial remote survey was conducted—10 questions on a 10-point Likert scale, defining the need for standardization of terminology and issues with current language in use. A stakeholder meeting was conducted in person, with each representative invited to express their views on idealized terminology for different weightbearing protocols postoperatively. Several rounds of voting were conducted until consensus was met.

**Results:** A pre-meeting questionnaire identified agreement that current descriptors for weightbearing status after injury are not clear. All stakeholders agreed a standardized set of terms would be valuable in clinical practice to both health-care professionals and patients, research, and policy/guideline production. There was agreement that any prescription restricting weightbearing needs clinical justification recorded in the notes, and that if a patient is unable to progress then reviewed after 48 hours. A set of terms for non, full, and restricted weightbearing after injury, with precise definitions, was agreed upon with full consensus.

**Conclusion:** Standardized terminology for post-injury/surgery weightbearing instructions has been agreed by all major stakeholders in the UK. This will allow for better understanding of the reality of our practice, improved communication to patients, and more robust academic research. Avoidance of subjective terms or those that can be easily misinterpreted is key.