Promoting Practitioner Wellness in the Neurotology Clinic – An Ergonomic Assessment of the Dix-Hallpike's Test.

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March 30, 2022

Abstract

Objectives: Numerous tasks carried out in the otolaryngology clinic increase the chances of developing injury among practitioners. To mitigate this, we aim to observe the risk of musculoskeletal injury in practitioners when carrying out common procedures. We observe the performance of the Dix-Hallpike manoeuvre, deducing whether technique has an impact on the likelihood of developing injury. Design: Participants were asked to perform the Dix-Hallpike manoeuvre as they normally would in clinic, on departmental colleagues. Data that was collected included chosen preference of position when carrying out manoeuvre, level of seniority of practitioner and risk of musculoskeletal injury to practitioner. Setting: Simulated outpatient department; St John's Hospital, Edinburgh. Participants: Otolaryngology consultants and trainees with clinic commitments, having regularly performed the Dix-Hallpike manoeuvre. Main outcome measures: Risk of musculoskeletal injury was measured using the validated Rapid Upper Limb Assessment (RULA) tool. Results: 3 consultants and 7 trainees were included in this study performing on average 4 Dix-Hallpike's during the study period – totalling 40 attempts. The median RULA score was 4 for the sitting position, compared to 6 for standing (p<0.0001). There was similar statistical significance when consultants and trainees were evaluated separately. Conclusions: A doctor's wellness is of great importance to facilitate long-term job satisfaction and productivity. It is important to improve conditions for the practitioner in the otology clinic, and one factor is procedural technique. Further work is needed to raise ergonomic awareness amongst otolaryngology surgeons.

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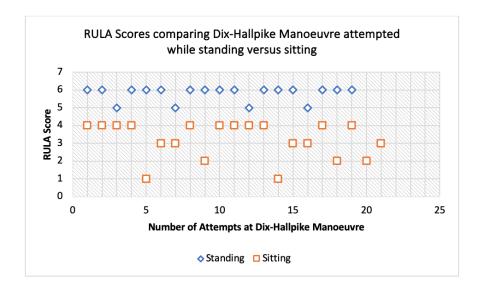
based on RULA: a survey method for the investigation of work-related upper limb disorders, McAtamney & Corlett, Applied Ergonomics 1993, 24(2), 91-91





Figure 2a Figure 2b

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