

Prehabilitation and rehabilitation in action

Case study template

	Description
Summary of patients social history and relevant past and current medical history	<p>Upper Gastrointestinal (UGI) cancer patients coming through clinic at University Hospitals Dorset NHS Foundation Trust.</p> <p>These patients have been identified at MDT that they could be for surgery, therefore appropriate staging, PMH, and fit for anaesthesia</p> <p>Patients are normally independently mobile and independent with activities of daily living.</p>
Type of prehabilitation, rehabilitation screening undertaken and by whom (which roles)	<p>Patient booked into UGI MDT clinic via the Clinical Nurse Specialists (CNS's) and surgeons</p> <p>Physiotherapy will attempt to see all patients within the clinic</p>
Type of prehabilitation/rehabilitation assessment(s) undertaken and by whom (which roles)	<p>Physiotherapist assesses patients...</p> <p>Via subjective assessment including both current generic physical ability established and current exercise activities established.</p> <p>No outcome measures collected due to current time (of patient and therapist) constraints and lack of space</p>
Interventions delivered	
Universal	<p>Exercise: Universal advice – Macmillan physical activity booklet</p> <p>Nutrition: CNS provide general advice prior to clinic</p>

	<p>Psychosocial support: Cancer Support Worker</p> <p>Other:</p>
Targeted	<p>Exercise: Bespoke exercise programme via physio tools for home based exercise. Offer referral to BACSUP ¹/exercise on referral scheme as patient agrees</p> <p>Nutrition: Provided by Dietitian within clinic</p>
Specialist	<p>Nutrition: Provided by dietitian within clinic</p>
Monitoring and evaluation	<p>Patient reviewed post diagnosis/pre treatment planning – in clinic Patient review pre neoadjuvant chemo – in clinic Patient review pre op – in clinic General mobility and rehab review on ward as indicated Patient review post op 2-4/52 – in clinic</p>
Outcome measures used	<p>No formal outcome measures currently established Looking into patient feedback</p> <p>Anecdotally – feel that patients are better prepared for surgery and more engaged with optimising their pre surgery performance status. Insufficient time within clinic to use true motivational interviewing techniques, this is further compounded by lack of time to follow up patients to ensure behaviour change established.</p> <p>*This is an un-funded service, provided by the Acute Specialist Surgical Physiotherapist at RBH, UHD. It was instigated by the physiotherapist themselves, with limited resource and time taken away from acute ward work to provide. Therefore if able to gain funding service would be further developed. There has been great and on going from the UGI surgical team. Of note if patients are coming in from Salisbury then they would have received prehab through their service.*</p>

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