

Satisfaction with Rehab, Refit, Return to Duty (Rx3) Rehabilitation Program for Back and Knee Pain in Service Members and Veterans

Corey Pegues^{1,2}, Michael Smuda^{1,2}, Amelia Barrett^{1,2}, Alexandria Gregory^{1,2}, Sarah de la Motte³, Daniel Clifton^{1,2}

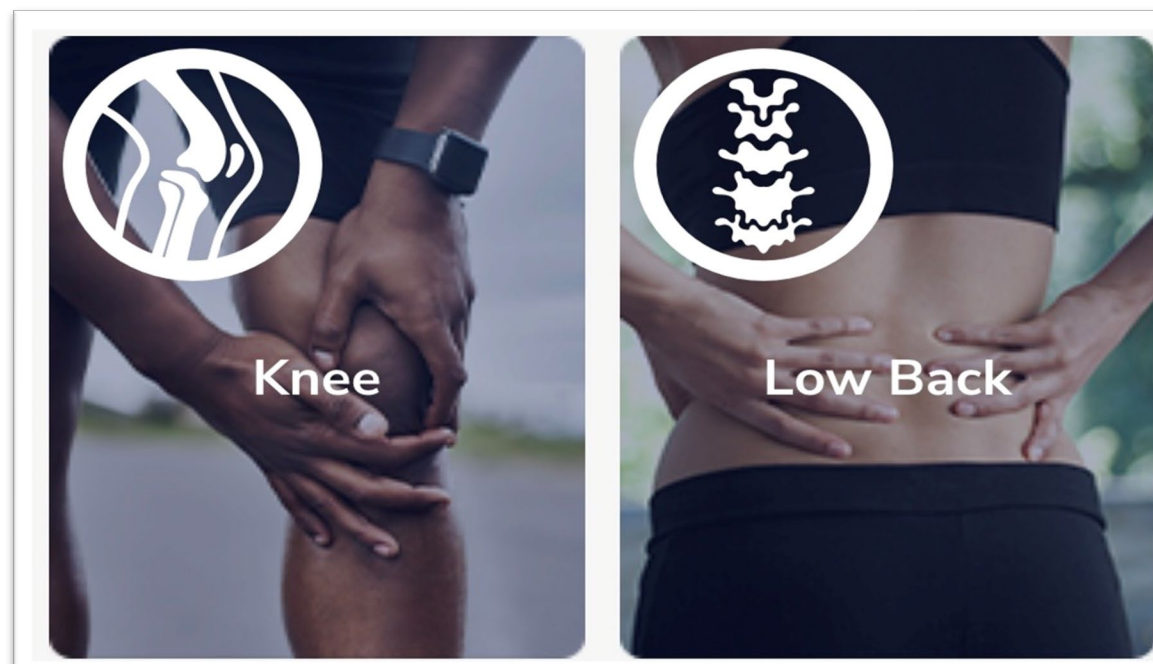
¹Center for Advanced Research for Military Optimization Readiness and Rehabilitation, Department of Physical Medicine and Rehabilitation, F. Edward Hébert School of Medicine, Uniformed Services University, Bethesda, MD, ²Henry M. Jackson Foundation for the Advancement of Military Medicine, Inc., Bethesda, MD, ³MissionReady Prevention Systems, LLC, Carbondale, CO

INTRODUCTION

- Musculoskeletal disorders (MSKD) of the low back and knee are common in military populations ^{1,2}
- Satisfaction with mobile applications may influence app use, while mobile rehabilitation applications can improve access to care and patient engagement during recovery ^{3,4}
- Rehab, Refit, Return to Duty (Rx3)** was developed as a self-guided, at-home, mobile rehabilitation program to improve strength, endurance, and flexibility
- Low back and knee Rx3 programs include 4-phase guidance focused on simple and safe stretching and strengthening exercises with minimal equipment

PURPOSE

To assess Service Members' and Veterans' self-reported satisfaction of the Rx3 mobile application for low back and knee pain



METHODS

- Participants were referred to Rx3 from their primary care provider
- Surveys were administered to assess demographics, phase completion, and satisfaction
- Responses represented completed program phases, and participants could complete multiple surveys if they completed multiple phases



Scan QR code to access
Rx3 program

QUESTIONS?
Contact

corey.pegues.ctr@usuhs.edu
for more information!

Rate your satisfaction with the Rx3 Program					
	Extremely Satisfied	Satisfied	Neutral	Unsatisfied	Extremely Unsatisfied
Ease of use, clear instructions, photos, and videos:	☐	☐	☐	☐	☐
Exercise Selection:	☐	☐	☐	☐	☐
Ability to do at home:	☐	☐	☐	☐	☐
Progression of each phase:	☐	☐	☐	☐	☐

Figure 1. Self-perceived Rx3 Program Satisfaction Survey Item

RESULTS

Table 1. Participant Descriptives

N	62 Survey Responses	
Sex	Males	69% (n=43)
	Females	31% (n=19)
Age Range (yrs)	18-34	15% (n=9)
	35-54	37% (n=23)
	55-74	47% (n=29)
	75+	1% (n=1)
Service Status	Active Duty	15% (n=9)
	Veteran	86% (n=53)
Rx3 Program	Low Back	76% (n=47)
	Knee	24% (n=15)
Rx3 Phase Completion (Low Back and Knee)	Phase 0	21% (n=13)
	Phase 1	19% (n=12)
	Phase 2	13% (n=8)
	Phase 3	47% (n=29)

REFERENCES

- Glaviano NR, et al. J Athl Train. 2021 PMID: 34752626
- Gun BK, et al. Military Medicine. 2022 PMID: 34159385
- Beresford L, et al. JMIR. 2022 PMID: 35107436
- Monárrez R, et al. J Am Acad Orthop Surg Glob Res Rev. 2023 PMID: 37678829

Disclaimers: The opinions and assertions expressed herein are those of the author(s) and do not reflect the official policy or position of the Uniformed Services University or the Department of War. The contents of this publication are the sole responsibility of the author(s) and do not necessarily reflect the views, opinions or policies of The Henry M. Jackson Foundation for the Advancement of Military Medicine, Inc. Mention of trade names, commercial products, or organizations does not imply endorsement by the U.S. Government.

Rx3 Participant Satisfaction

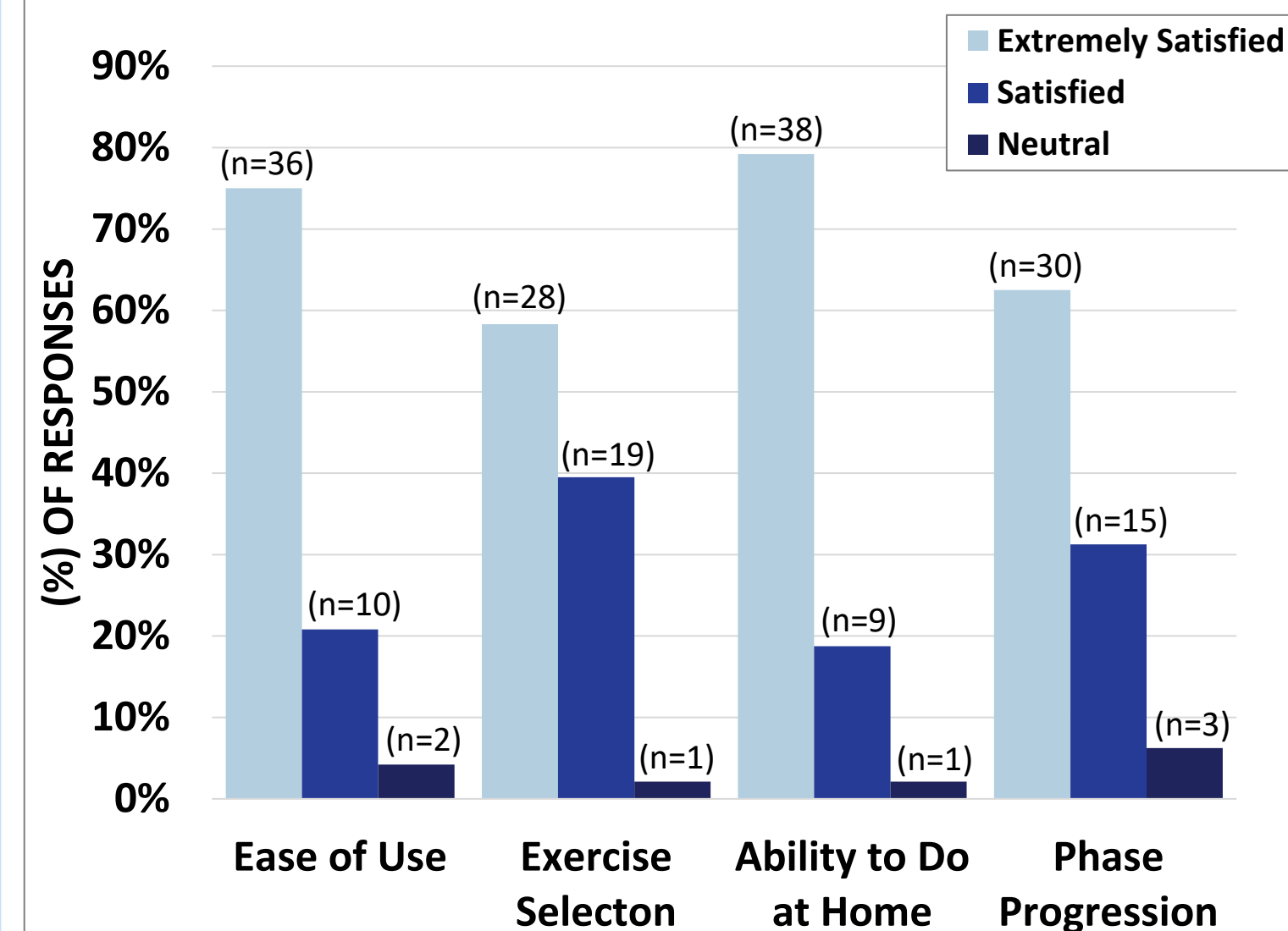


Figure 2. Participant Satisfaction Results

CONCLUSIONS

- High satisfaction reported across all factors of Rx3
- Phase progression received the lowest overall satisfaction rate
- Future research should focus on Rx3's efficacy in reducing pain and improving function
- A limitation is potential response bias, as more satisfied participants may have been more likely to complete the survey, while less satisfied ones may have discontinued the program or not participated