300 word summary in lay language

There are published Clinical Practice Guidelines (CPGs) intended to guide clinicians in the treatment of patients with musculoskeletal shoulder pain. However, there is a lack of evidence that the use of these CPGs improve patient care. This project will convert routinely collected clinical data into meaningful data elements to characterize the outcomes of care and dose of physical therapy, and adherence to CPGs.

Clinical data from patients (n= 590) treated at the clinics at the University of Southern California Physical Therapy Associates in Los Angeles, CA, and at the clinics at ATI Physical Therapy in the greater Greenville, SC area will be extracted from the electronic medical record.

Clinicians from other clinics will also be asked to participate in this project, which will facilitate the expansion of the Clinical Research Network. Episodes of care will be defined from the initial evaluation to discharge, and number of visits occurring in the episode will be tallied. Adherence to care groups will be defined as low adherence (<75% adherence to CPG) and high adherent care ($\geq$75% adherence). Meaningful change in patient-rated outcomes will be defined as those undergoing change that is $\geq$ MCID.

We will characterize the effects of CPG adherence on outcomes of care for patients undergoing physical therapy for shoulder pain by 1-comparing outcomes between adherence groups, 2-the number of patients who had a meaningful change in outcome, and 3-dose of care (visits). Finally, we will characterize the relationship between outcomes of care, dose, and adherence for patients receiving physical therapy for shoulder pain. This study will fill critical gaps as to the effects of adherence to evidence-based CPGs. Defining the relationship between adherence to CPG with outcomes and dose of physical therapy will define the use of CPG.