

> BACK AND NECK PROGRAMME

The back and neck programme helps members living with chronic back and neck pain treat the cause of their pain and improve their quality of life. Run by Documentation Based Care (DBC), the programme incorporates the best protocols to improve functional ability and work capability - successfully and effectively - with minimum pain.

Please note: The programme does not cover the costs of x-rays, scans and prescribed medicines



HOW DOES THE PROGRAMME WORK?



1 You will be assessed by a biokineticist and a doctor. This includes a physical examination and tests to check range of movement, nerve health and more.

2 The doctor will take your medical history and explain the possible cause of the chronic pain and the DBC protocol to you.

3 A treatment plan will be put together for you. A patient contract is then signed committing you for up to six weeks of treatment, twice a week. Sessions are an hour long (30 minutes with a biokineticist and 30 minutes with a physiotherapist).

4 Depending on prescribed treatment, after six sessions, the doctor will re-examine you to determine progress. The protocol is repeated if needed. If all is well, you are discharged with a home exercise programme.

DETAILS FOR BACK AND NECK

Call: 0860 002 108
Website: www.dbcса.co.za



WHAT DOES THE BACK AND NECK PROGRAMME COVER?

The programme takes a comprehensive and holistic approach to chronic pain and offers individualised treatment to patients. After an initial assessment, beneficiaries receive treatment twice a week for up to six weeks. We cover the full cost of the programme. This multidisciplinary programme includes treatment from doctors, physiotherapists and biokineticists to treat severe neck and back pain. The treatment consists of active exercise with appropriate weights and motion. After the initial treatment, you receive a home-based programme to maintain results long-term.

WHO CAN ACCESS THIS BENEFIT?

This benefit is available to members identified by the Active Disease Risk Management Team and providers may contact us to register eligible beneficiaries. Identified or eligible members are then referred to the programme. Members may also contact DBC directly. This benefit is not available to members on BonCap.

WHAT HAPPENS IF I DO NOT USE DBC BEFORE SPINAL SURGERY?

If you are on BonComprehensive, BonClassic, Standard, Standard Select or BonComplete and you choose to go for spinal surgery without first visiting DBC, you will have to pay a R6 000 co-payment.