METHODS

LEARNING OBJECTIVES

BACKGROUND AND PURPOSE

• Unintentional musculoskeletal injuries are an important cause of morbidity in the Naval Special Warfare Operator population. Many of these injuries occur as a result of physical training and sports, and result in pain, disability, loss of duty time, medical evacuation from theater, and loss of tactical readiness. They are associated with high cost due to healthcare utilization and disability.

• Descriptive and analytical epidemiology studies require availability of valid and reliable injury data. Self-reported data are often used in injury epidemiology, but self-reported data are prone to issues with recall.

• The aim of this analysis was to assess self-reported recall of unintentional musculoskeletal injuries among Operators in a Naval Special Warfare installation.

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RESULTS

• Of the 132 subjects (age = 27.6 ± 5.4 years, mean ± SD) who volunteered in this study, 101 subjects (age = 28.5 ± 5.6 years, mean ± SD) had at least one injury in their medical records, and were included in this analysis.

• Three hundred seventy four medical charts were reviewed to extract data about injuries.

• Recall was generally low:
  - 20.6% on matching location and year
  - 12.0% on matching location, and year and type.

• Recall was higher for head/face injuries, but the effect of injury anatomic location on recall was not statistically significant (p > 0.05) (Table 1).

• Recall percent (percent)
  - Lower extremity: 204 (54.5%) 17.6% 11.3%
  - Upper extremity: 97 (25.9%) 27.8% 11.3%
  - Spine: 58 (15.5%) 19.0% 13.8%
  - Torsso: 12 (3.2%) 16.7% 16.7%
  - Head/face: 2 (0.5%) 50.0% 50.0%

• Recall was expressed as the percent of medical chart-reviewed injuries correctly recalled in the self-report.

• Proportions were compared using the Fisher’s exact test.

DISCUSSION AND CONCLUSIONS

• Recall was generally low.

• Self-reported recall was lower for less severe injuries and for older injuries.

• Injury severity modified the effect of recall time on recall.

• Further investigation of factors affecting recall of injuries and methods to improve recall in the population is necessary.

• Funding for the Navy project is managed by the Office of Naval Research, Grant # N00014-08-1-0412. Opinions, interpretations, conclusions and recommendations are those of the authors and are not necessarily endorsed by the U.S. Navy.