



University of Washington Clinical Learning, Evidence and Research (CLEAR) Center

CLEAR Center Webinar

The AIM-Back Cluster Randomized Trial: Key Findings and Lessons Learned

Speaker: Dr. Steven George



**Monday
February 1, 2027
8-9 AM PST**

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Summary of talk:

In this webinar, Dr. George will review the background and design of the AIM-Back trial, followed by the trial's primary and secondary outcome analyses and key insights. The session will conclude with some forward-looking thoughts around testing the effectiveness of care delivery for individuals with low back pain.

AIM-Back is an embedded pragmatic cluster-randomized trial within the Veterans Health Administration that compared two care pathways designed to improve veterans' access to nonpharmacologic treatment for low back pain. Primary care clinics were randomized to either an integrated sequenced-care pathway, which combined on-site physical therapy, telephone physical activity coaching, and risk-stratified psychologically informed care, or a coordinated pain navigator pathway, in which a trained navigator used shared decision-making to connect veterans with guideline-supported services such as physical therapy, chiropractic care, acupuncture, and yoga. The investigators hypothesized that the sequenced pathway would produce greater improvements in the co-primary outcomes of PROMIS pain interference and physical function at 3 months, measured through the electronic health record. Delivered by existing clinical staff as part of routine care, the trial was planned for 16 clinics and about 1,680 veterans, and ultimately enrolled 1,817 veterans across 17 clinics between 2021 and 2024, with a subset (planned at 848) completing telephone surveys through 12 months for secondary outcomes such as sleep and opioid use. The findings are intended to guide how nonpharmacologic pain care is organized and delivered within and beyond the VA.

1. George SZ, Coffman CJ, Allen KD, et al. Improving Veteran Access to Integrated Management of Back Pain (AIM-Back): Protocol for an Embedded Pragmatic Cluster-Randomized Trial. *Pain Med.* 2020;21(Suppl 2):S62-S72.
2. George SZ, Coffman CJ, North R, et al. Sequenced Care Pathway vs Pain Navigator Pathway for Veterans With Low Back Pain: The AIM-Back Cluster Randomized Clinical Trial. *JAMA Netw Open.* 2026;9(4):e264421. Published 2026 Apr 1.

Steven Z. George, PT, PhD, FAPTA

Dr. George completed his physical therapy training at West Virginia University and worked clinically at the University of Pittsburgh Medical Center/Centers for Rehab Services. He completed his research training at the University of Pittsburgh and continued on to a postdoctoral fellowship at the University of Florida. Currently, Dr. George is a Laszlo Ormandy Distinguished Professor in Orthopaedic Surgery at Duke University. He is a member of the Duke Clinical Research Institute and has a secondary appointment in Population Health Sciences.



Dr. George's primary research interest involves using biopsychosocial models for the prediction and prevention of transition to chronic musculoskeletal pain disorders. He has presented extensively at international, national, and state conferences for physical therapy and pain research, including keynote and plenary sessions. He serves as Editor-in-Chief of *Physical Therapy & Rehabilitation Journal (PTJ)*, the official journal of the American Physical Therapy Association (APTA).

Dr. George has had his research funded by the National Institutes of Health, Department of Defense, Orthopaedic Academy of the APTA, and Patient-Centered Outcomes Research Institute. Along with his collaborators, he has authored over 400 peer-reviewed publications in leading physical therapy, medical, orthopaedic, rehabilitation, and pain research journals. He was a committee member for workshops on nonpharmacological pain management (2018) and disability from chronic pain (2025) hosted by the National Academies of Sciences, Engineering, and Medicine and he served on the Advisory Council for the National Center for Complementary and Integrative Health (2016-2019). Dr. George has collaborated on clinical practice guideline development with the Orthopaedic Academy of the APTA and the American Psychological Association. Dr. George is a Catherine Worthingham Fellow of the APTA and a past John HP Maley Lecturer, and he has also been recognized by the APTA with prestigious research awards: Eugene Michels for New Investigator, Jules Rothstein Golden Pen for Scientific Writing, Helen Hislop for Outstanding Contributions to Professional Literature, and Marian Williams for Research in Physical Therapy. Outside of the APTA, he has been recognized with the 2009 John C. Liebeskind Early Career Scholar Award from the American Pain Society (now defunct) and the 2012 Ulf Lindblom Young Investigator Award for Clinical Sciences from the International Association for the Study of Pain.