



Top 10 Disability Durations

April 18, 2013

J. Mark Melhorn MD

Disability Durations for the Top 10 Workers' Compensations Claims

Upper Limb

- 1. Carpal Tunnel Syndrome**
- 2. Ulnar Nerve Elbow**
- 3. Rotator cuff / Shoulder Impingement**
- 4. Fingertip amputations**

Spine

- 1. Low back pain – lumbar strain**
- 2. Lumbar diskectomy**
- 3. Lumbar fusion**
- 4. Neck pain**

Lower Limb

- 1. Knee Meniscectomy**
- 2. Ankle strain or sprain**

Notes:

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MDGuidelines

<http://www.mdguidelines.com/>

Official Disability Guidelines (ODG)

<http://www.disabilitydurations.com/>

The Hand Center

J. M. Melhorn and S. M. Seaman. Working With Common Upper Extremity Problems. In: The Guides to the Evaluation of Work Ability and Return to Work, edited by J. B. Talmage, J. M. Melhorn, and M. H. Hyman, Chicago, IL: American Medical Association, 2011, p. 177-228.

User friendly – email or call me

Please remember I am only the messenger.

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Notes:

This is **your opportunity to help your patients.**

Duration guidelines can be used as tools to you help patients understand what realistic return-to-work dates are.

Remember apples and oranges

What are you comparing?

Different ICD-9, ICD-10, CPT?

Different co-morbidities, outcomes, complications

Guidelines are guidelines

Differences may exist between the duration tables and the reference graphs. Duration tables provide expected recovery periods based on the type of work performed by the individual. The reference graphs reflect the actual experience of many individuals across the spectrum of physical conditions, in a variety of industries, and with varying levels of case management. Selected graphs combine multiple codes based on similar means and medians.

Return to work is a learned skill

Additional resources:

AAOS Occupational Orthopaedics and Workers' Compensation

Course: A Multidisciplinary Perspective – usually in November

at www.AAOS.com

http://www7.aaos.org/education/courses/course_detail.aspx?ProductId=25135

AADEP Annual Meeting – usually in January

at www.AADEP.org

Notes:

1. Carpal Tunnel Syndrome

ODG as 354.0 Carpal tunnel syndrome

Return-To-Work "Best Practice" Guidelines

Conservative treatment

- modified work (limit repetitive use of hand/wrist): 0 days
- regular work (if not aggravating to disability/use of splint): 0-5 days
- regular work (if work related & electrodiagnostically confirmed): 28 days
- regular work (with severe nerve impairment): indefinite

Endoscopic/mini-palm surgery

- modified work: 3-5 days
- regular work, non-dominant arm: 28 days
- regular/repetitive/heavy manual work, dominant arm: 42 days to indefinite

Open surgery

- modified work: 10-14 days
- non-dominant arm: 42 days
- regular/repetitive/heavy manual work, dominant arm: 56 days to indefinite
- regular/repetitive/heavy manual work, bilateral: 84 days to indefinite

Capabilities & Activity Modifications for Restricted Work:

Modified work: Repetitive motion activities (w or w/o splint) not more than 4 times/hr; repetitive keying up to 15 keystrokes/min not more than 2 hrs/day; gripping and using light tools (pens, scissors, etc.) with 5-minute break at least every 20 min; no pinching; driving car up to 2 hrs/day; light work up to 5 lbs 3 times/hr; avoidance of prolonged periods in wrist flexion or extension.

Regular work (if not cause or aggravating to disability) : Repetitive motion activities not more than 25 times/hr; repetitive keying up to 45 keystrokes/min 8 hrs/day; gripping and using moderate tools (pliers, screwdrivers, etc.) fulltime; pinching up to 5 times/min; driving car or light truck up to 6 hrs/day or heavy truck up to 3 hrs/day; moderate to heavy work up to 35 lbs not more than 7 times/hr.

Description: Compression of the nerve that travels through the wrist to the thumb side of the hand causing pain, tingling, or numbness along the wrist, palm, and fingers. Pain may also be felt in the arm or shoulder, and is often worse while sleeping.

Disability Duration Adjustment Factors by Age						
Age Group	18-24	25-34	35-44	45-54	55-64	65-74
Adjustment Factor	0.34	0.75	1.08	1.15	1.10	NA

RTW Claims Data (Calendar-days away from work by decile)

Notes:

10%	20%	30%	40%	50%	60%	70%	80%	90%	100%	Mean
12	15	22	29	42	46	57	84	161	365	71.23

RTW Post Surgery (Calendar-days away from work by decile)

10%	20%	30%	40%	50%	60%	70%	80%	90%	100%	Mean
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Wrist endoscopy/surgery (CPT 29848)

16	26	32	40	46	57	68	83	130	365	65.88
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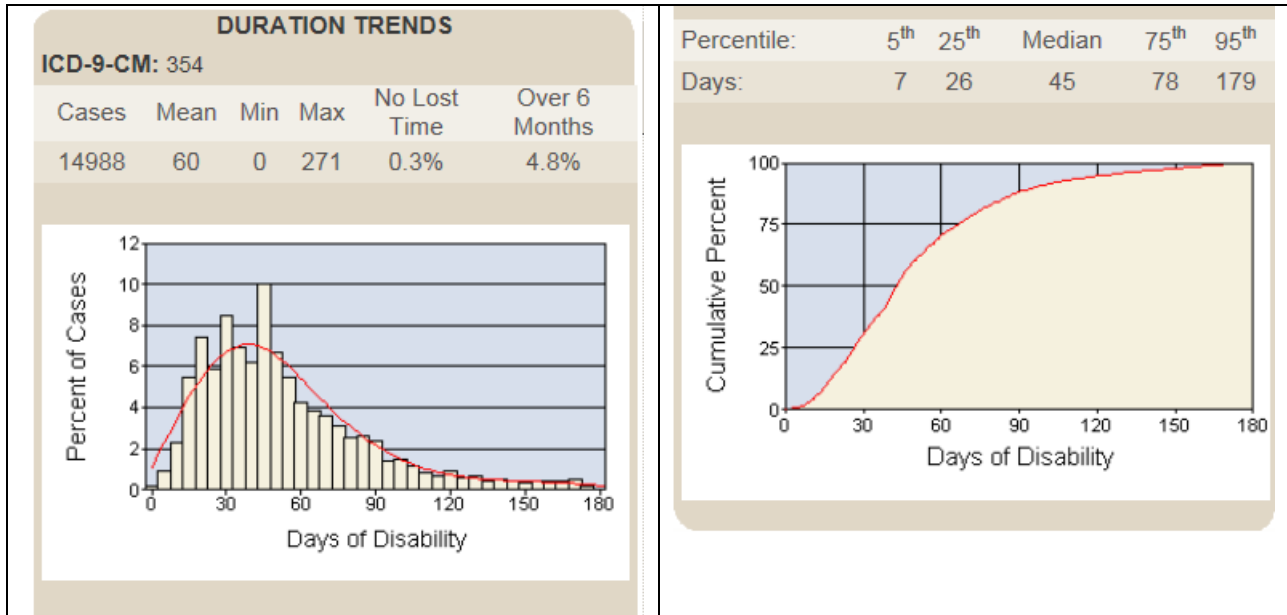
Carpal tunnel surgery (CPT 64721)

18	30	39	46	54	65	81	107	185	365	81.96
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MDGuidelines as 354.0 Carpal tunnel syndrome

<p>Medical treatment, carpal tunnel syndrome.</p> <p>DURATION IN DAYS</p> <table border="1"> <thead> <tr> <th>Job Classification</th> <th>Minimum</th> <th>Optimum</th> <th>Maximum</th> </tr> </thead> <tbody> <tr> <td>Sedentary</td> <td>0</td> <td>7</td> <td>21</td> </tr> <tr> <td>Light</td> <td>0</td> <td>7</td> <td>21</td> </tr> <tr> <td>Medium</td> <td>0</td> <td>14</td> <td>28</td> </tr> <tr> <td>Heavy</td> <td>0</td> <td>21</td> <td>42</td> </tr> <tr> <td>Very Heavy</td> <td>0</td> <td>28</td> <td>63</td> </tr> </tbody> </table>				Job Classification	Minimum	Optimum	Maximum	Sedentary	0	7	21	Light	0	7	21	Medium	0	14	28	Heavy	0	21	42	Very Heavy	0	28	63	<p>Surgical treatment, open or endoscopic carpal tunnel release.</p> <p>DURATION IN DAYS</p> <table border="1"> <thead> <tr> <th>Job Classification</th> <th>Minimum</th> <th>Optimum</th> <th>Maximum</th> </tr> </thead> <tbody> <tr> <td>Sedentary</td> <td>1</td> <td>14</td> <td>42</td> </tr> <tr> <td>Light</td> <td>3</td> <td>21</td> <td>42</td> </tr> <tr> <td>Medium</td> <td>14</td> <td>28</td> <td>56</td> </tr> <tr> <td>Heavy</td> <td>21</td> <td>42</td> <td>84</td> </tr> <tr> <td>Very Heavy</td> <td>28</td> <td>56</td> <td>91</td> </tr> </tbody> </table>				Job Classification	Minimum	Optimum	Maximum	Sedentary	1	14	42	Light	3	21	42	Medium	14	28	56	Heavy	21	42	84	Very Heavy	28	56	91
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Notes:



THC as 354.0 Carpal tunnel syndrome

THC = The Hand Center (my practice)

MDG = MDGuidelines first number is MDA 5 and second number is MDA 6 if only one number then same for both editions

Non-Surgical CTS

Job	Target	THC	Tmax	Opt	MDG	Max
		Tmin			Min	
Sedentary	0	0	7	7	0	21
Light	0	0	7	7	0	21
Medium	0	0	12	14	0	28
Heavy	0	0	21	21	0	42
Very Heavy	0	0	28	18/28	0	63

Surgical CTS (Mini-Palm at THC), All types by MDG

Job	Target	THC	Tmax	Opt	MDG	Max
		Tmin			Min	
Sedentary	0	0	7	14	1	42
Light	0	0	7	28/21	1/3	42
Medium	14	0	28	42/28	14	56
Heavy	21	0	42	42	28//21	84
Very Heavy	28	3	61	56	28	84/91

Notes:

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Non-Surgical UNE

Job	Target	THC		Opt	MDG	
		Tmin	Tmax		Min	Max
Sedentary	0	0	7	x/7	x/0	x/28
Light	0	0	7	x/10	x/1	x/28
Medium	0	0	14	x/21	x/7	x/56
Heavy	0	0	21	x/28	x/14	x/56
Very Heavy	0	0	28	x/28	x/14	x/56

Surgical UNE (decompression- possible transposition THC), All types by MDG

Job	Target	THC		Opt	MDG	
		Tmin	Tmax		Min	Max
Sedentary	0	0	7	21/14	7	42/28
Light	0	0	7	28	7	42
Medium	14	0	28	56/42	28	365/84
Heavy	21	0	47	98/56	28/35	365/112
Very Heavy	28	0	56	98/84	42	365/126

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3. Rotator cuff / Shoulder Impingement

Very wide category, CPT codes sprains, strains, AC-joint, coracoclavicular infrapinatus, rotator cuff, etc

ODG as 840.4 Rotator cuff

Return-To-Work "Best Practice" Guidelines

Medical treatment

- modified work: 0 days
- manual work: 7 days
- manual overhead work: 28 days
- heavy manual work: 56 days

Arthroscopic surgical repair/acromioplasty

- clerical/modified work: 28 days

Notes:

manual work, non-dominant arm: 56 days
 manual work, dominant arm: 70 days

Open surgery

clerical/modified work: 42-56 days
 manual work, non-dominant arm: 70-90 days
 manual work, dominant arm: 106-180 days
 heavy manual work if cause of disability: indefinite

Capabilities & Activity Modifications for Restricted Work:

Modified work: No overhead work (reaching above shoulder) plus no reaching to shoulder level (90 degree position); no holding arm in abduction or flexion; pulling and pushing not more than 8 lbs up to 4 times/hr; lifting and carrying up to 5 lbs 3 times/hr; single arm upper extremity work using injured arm for light work only; possible immobilization by abduction brace, sling, or clavicle brace; no climbing ladders.

Manual work: Reaching above shoulder not more than 12 times/hr with up to 15 lbs of weight; reaching to shoulder up to 15 times/hr with up to 25 lbs of weight; holding arm in abduction or flexion up to 12 times/hr with up to 15 lbs of weight; pulling and pushing up to 60 lbs 20 times/hr; lifting and carrying up to 40 lbs 15 times/hr; single upper extremity work using injured arm for moderate work only (full use of non-injured arm); possible immobilization by abduction brace, sling, or clavicle brace; climbing ladders up to 50 rungs/hr.

MDGuidelines as 840.4 Rotator cuff

Surgical treatment, arthroscopic rotator cuff repair.				Surgical treatment, open rotator cuff repair.			
DURATION IN DAYS				DURATION IN DAYS			
Job Classification	Minimum	Optimum	Maximum	Job Classification	Minimum	Optimum	Maximum
Sedentary	7	10	21	Sedentary	7	14	70
Light	7	10	42	Light	7	21	84
Medium	28	42	70	Medium	28	84	112
Heavy	56	84	112	Heavy	56	98	140
Very Heavy	70	112	140	Very Heavy	70	112	154

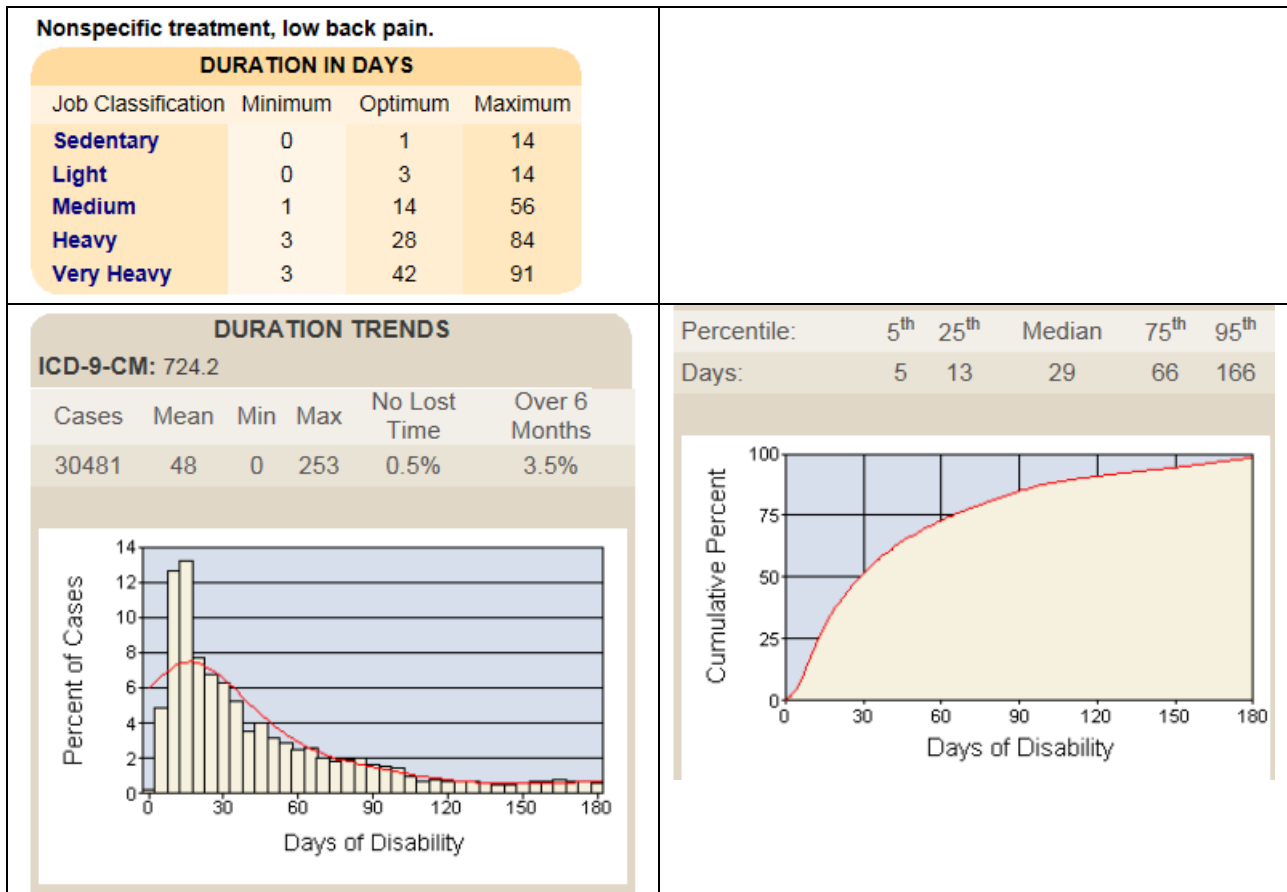
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Non-Surgical Rotator Cuff Tear

Job	Target	THC Tmin	Tmax	Opt	MDG Min	Max
Sedentary	0	0	1	3	0	4
Light	0	0	1	3	0	7

Notes:



ODG as 722.1, 722.2, 722.32, 722.52, 722.73, 722.83, 722.93, 724.0, 724.3, 724.4 as With Radiculopathy (722.x intervertebral disc disorders)

ODG Return-To-Work Pathways

Discectomy

- clerical/modified work: 28 days
- manual work: 56 days
- heavy manual work: 126 days to indefinite

Laminectomy

- clerical/modified work: 28 days
- manual work: 70 days
- heavy manual work: 105 days to indefinite

MDGuidelines as 724.2, 724.4, 724.5 discectomy

Notes:

Surgical treatment, lumbar spinal fusion.			
DURATION IN DAYS			
Job Classification	Minimum	Optimum	Maximum
Sedentary	42	49	84
Light	56	63	84
Medium	70	77	112
Heavy	84	168	Indefinite
Very Heavy	84	168	Indefinite

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4. Neck pain

ODG as 847.0 Neck Whiplash

- Return-To-Work "Best Practice" Guidelines
- Whiplash grade 0 (Quebec Task Force grades): 0 days
- Whiplash grade I-III
 - clerical/modified work: 5 days
 - manual work: 21 days
 - heavy manual work: 28 days
- Whiplash grade IV: see 805 (fracture)

Capabilities & Activity Modifications for Restricted Work:
 Clerical/modified work: No lifting over shoulder; lifting to level of shoulder not more than 5 lbs up to 2 times/hr; standing or walking with a 5-minute break at least every 20 minutes; sitting with a 5-minute break every 30 minutes (using an operator head set if extended phone operations); no extremes of motion including extension or flexion; no extremes of twisting or lateral rotation; no climbing ladders; driving car only up to 2 hrs/day; possible use of cervical collar with change of position and stretching every 30 min; modify workstation or position to eliminate lifting away from body or using twisting motion.
 Manual work: Lifting over shoulder not more than 25 lbs up to 15 times/hr; lifting to level of shoulder up to 30 lbs of weight not more than 15 times/hr; standing or walking with a 10-minute break at least every 1-2 hours; sitting with a 10-minute break every 1-2 hours; extremes of flexion or extension allowed up to 20 times/hr; extremes of twisting allowed up to 16 times/hr; climbing ladders allowed up to 40 rungs 8 times/hr; driving car or light truck up to a full work day; driving heavy truck up to 4 hrs/day.

MDGuidelines as 723.3 cervicobrachial syndrome

Notes:

<p>Supportive treatment, cervicobrachial syndrome.</p> <table border="1"> <thead> <tr> <th colspan="4">DURATION IN DAYS</th> </tr> <tr> <th>Job Classification</th> <th>Minimum</th> <th>Optimum</th> <th>Maximum</th> </tr> </thead> <tbody> <tr> <td>Sedentary</td> <td>0</td> <td>3</td> <td>7</td> </tr> <tr> <td>Light</td> <td>0</td> <td>7</td> <td>14</td> </tr> <tr> <td>Medium</td> <td>0</td> <td>7</td> <td>21</td> </tr> <tr> <td>Heavy</td> <td>0</td> <td>14</td> <td>28</td> </tr> <tr> <td>Very Heavy</td> <td>0</td> <td>28</td> <td>56</td> </tr> </tbody> </table>	DURATION IN DAYS				Job Classification	Minimum	Optimum	Maximum	Sedentary	0	3	7	Light	0	7	14	Medium	0	7	21	Heavy	0	14	28	Very Heavy	0	28	56	<p>Supportive treatment, cervical spine sprain or strain.</p> <table border="1"> <thead> <tr> <th colspan="4">DURATION IN DAYS</th> </tr> <tr> <th>Job Classification</th> <th>Minimum</th> <th>Optimum</th> <th>Maximum</th> </tr> </thead> <tbody> <tr> <td>Sedentary</td> <td>1</td> <td>1</td> <td>7</td> </tr> <tr> <td>Light</td> <td>1</td> <td>7</td> <td>14</td> </tr> <tr> <td>Medium</td> <td>3</td> <td>21</td> <td>42</td> </tr> <tr> <td>Heavy</td> <td>3</td> <td>35</td> <td>56</td> </tr> <tr> <td>Very Heavy</td> <td>3</td> <td>42</td> <td>70</td> </tr> </tbody> </table>	DURATION IN DAYS				Job Classification	Minimum	Optimum	Maximum	Sedentary	1	1	7	Light	1	7	14	Medium	3	21	42	Heavy	3	35	56	Very Heavy	3	42	70
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1. Knee Meniscectomy

ODG as 836.0 as medial meniscus

ODG Return-To-Work Pathways

Without surgery

clerical/modified work: 0-2 days

manual/standing work: 21 days

With arthroscopy

clerical/modified work: 14 days

manual/standing work: 42 days

With arthrotomy

clerical/modified work: 28 days

manual/standing work: 56 days

heavy manual/standing work: 84 days

Capabilities & Activity Modifications for Restricted Work:

Sedentary/modified work: Standing limited to 5-10 min/hr; walking only on a smooth surface using crutches with limited pressure on the foot; no walking on an irregular surface; no climbing stairs; no climbing ladders or hill climbing requiring frequent knee flexion; no activities

Notes:

requiring balance; no applying strength against bent knee (squatting, kneeling, crouching, stooping, pedaling, etc.); elevate leg half of time; may need immobilization; limited weight bearing.

Manual/standing work: Standing not more than 50 min/hr; walking on a smooth surface up to 1,200 ft/hr carrying up to 25 lbs; walking on an irregular surface up to 900 ft/hr carrying up to 25 lbs; climbing stairs up to 8 flights/hr carrying up to 40 lbs; climbing ladders up to 50 rungs/hr carrying up to 25 lbs; activities requiring balance up to 45 min/hr (if able to work with two hands without assistance for balance); applying strength against bent knee (pedaling, squatting, kneeling, etc.) up to 60 times/hr; may need brace for uneven ground or ladders.

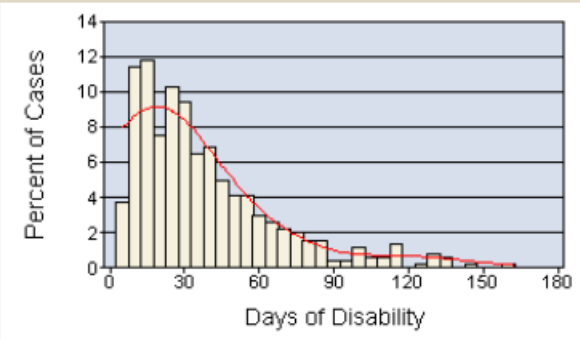
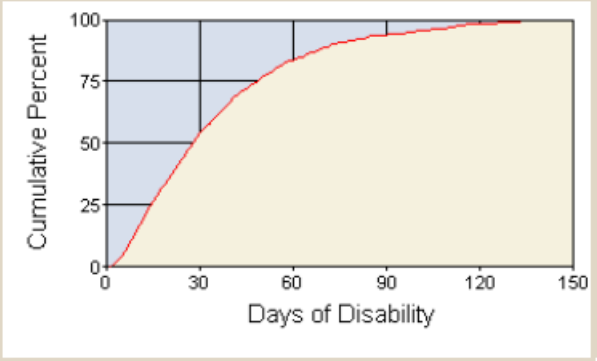
MDGuidelines as ICD-9-CM: as 717.0, 717.1, 717.2, 717.3, 717.4, 717.40, 717.41, 717.42, 717.43, 717.49, 717.5, 836.0, 836.1, 836.2 and ICD-10: asM23.0, M23.1, M23.2, M23.3, S83.2, S83.3

<p>Medical treatment, meniscus disorder.</p> <table border="1"> <thead> <tr> <th colspan="4">DURATION IN DAYS</th> </tr> <tr> <th>Job Classification</th> <th>Minimum</th> <th>Optimum</th> <th>Maximum</th> </tr> </thead> <tbody> <tr> <td>Sedentary</td> <td>7</td> <td>7</td> <td>14</td> </tr> <tr> <td>Light</td> <td>7</td> <td>14</td> <td>21</td> </tr> <tr> <td>Medium</td> <td>14</td> <td>28</td> <td>42</td> </tr> <tr> <td>Heavy</td> <td>28</td> <td>35</td> <td>91</td> </tr> <tr> <td>Very Heavy</td> <td>28</td> <td>42</td> <td>91</td> </tr> </tbody> </table>	DURATION IN DAYS				Job Classification	Minimum	Optimum	Maximum	Sedentary	7	7	14	Light	7	14	21	Medium	14	28	42	Heavy	28	35	91	Very Heavy	28	42	91	<p>Surgical treatment, arthroscopic meniscectomy.</p> <table border="1"> <thead> <tr> <th colspan="4">DURATION IN DAYS</th> </tr> <tr> <th>Job Classification</th> <th>Minimum</th> <th>Optimum</th> <th>Maximum</th> </tr> </thead> <tbody> <tr> <td>Sedentary</td> <td>7</td> <td>14</td> <td>28</td> </tr> <tr> <td>Light</td> <td>7</td> <td>14</td> <td>35</td> </tr> <tr> <td>Medium</td> <td>14</td> <td>21</td> <td>56</td> </tr> <tr> <td>Heavy</td> <td>21</td> <td>42</td> <td>84</td> </tr> <tr> <td>Very Heavy</td> <td>28</td> <td>42</td> <td>126</td> </tr> </tbody> </table>	DURATION IN DAYS				Job Classification	Minimum	Optimum	Maximum	Sedentary	7	14	28	Light	7	14	35	Medium	14	21	56	Heavy	21	42	84	Very Heavy	28	42	126
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Notes:

carrying up to 25 lbs; activities requiring balance up to 45 min/hr (if able to work with two hands without assistance for balance); applying strength against bent knee (pedaling, squatting, kneeling, etc.) up to 60 times/hr; may need brace for uneven ground or ladders.

MDGuidelines as ICD-9-CM: as 845, 845.0, 845.00, 845.01, 845.02, 845.03, 845.09 and ICD-10: as S86.0, S93, S93.2, S93.4

<p>Supportive treatment, ankle sprain or strain (first or second-degree).</p> <table border="1"> <thead> <tr> <th colspan="4">DURATION IN DAYS</th> </tr> <tr> <th>Job Classification</th> <th>Minimum</th> <th>Optimum</th> <th>Maximum</th> </tr> </thead> <tbody> <tr> <td>Sedentary</td> <td>0</td> <td>3</td> <td>7</td> </tr> <tr> <td>Light</td> <td>1</td> <td>3</td> <td>7</td> </tr> <tr> <td>Medium</td> <td>3</td> <td>7</td> <td>14</td> </tr> <tr> <td>Heavy</td> <td>7</td> <td>14</td> <td>28</td> </tr> <tr> <td>Very Heavy</td> <td>7</td> <td>14</td> <td>28</td> </tr> </tbody> </table>	DURATION IN DAYS				Job Classification	Minimum	Optimum	Maximum	Sedentary	0	3	7	Light	1	3	7	Medium	3	7	14	Heavy	7	14	28	Very Heavy	7	14	28	<p>Supportive treatment, ankle sprain or strain (third-degree).</p> <table border="1"> <thead> <tr> <th colspan="4">DURATION IN DAYS</th> </tr> <tr> <th>Job Classification</th> <th>Minimum</th> <th>Optimum</th> <th>Maximum</th> </tr> </thead> <tbody> <tr> <td>Sedentary</td> <td>1</td> <td>3</td> <td>7</td> </tr> <tr> <td>Light</td> <td>1</td> <td>7</td> <td>28</td> </tr> <tr> <td>Medium</td> <td>7</td> <td>14</td> <td>42</td> </tr> <tr> <td>Heavy</td> <td>14</td> <td>21</td> <td>70</td> </tr> <tr> <td>Very Heavy</td> <td>14</td> <td>21</td> <td>84</td> </tr> </tbody> </table>	DURATION IN DAYS				Job Classification	Minimum	Optimum	Maximum	Sedentary	1	3	7	Light	1	7	28	Medium	7	14	42	Heavy	14	21	70	Very Heavy	14	21	84
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