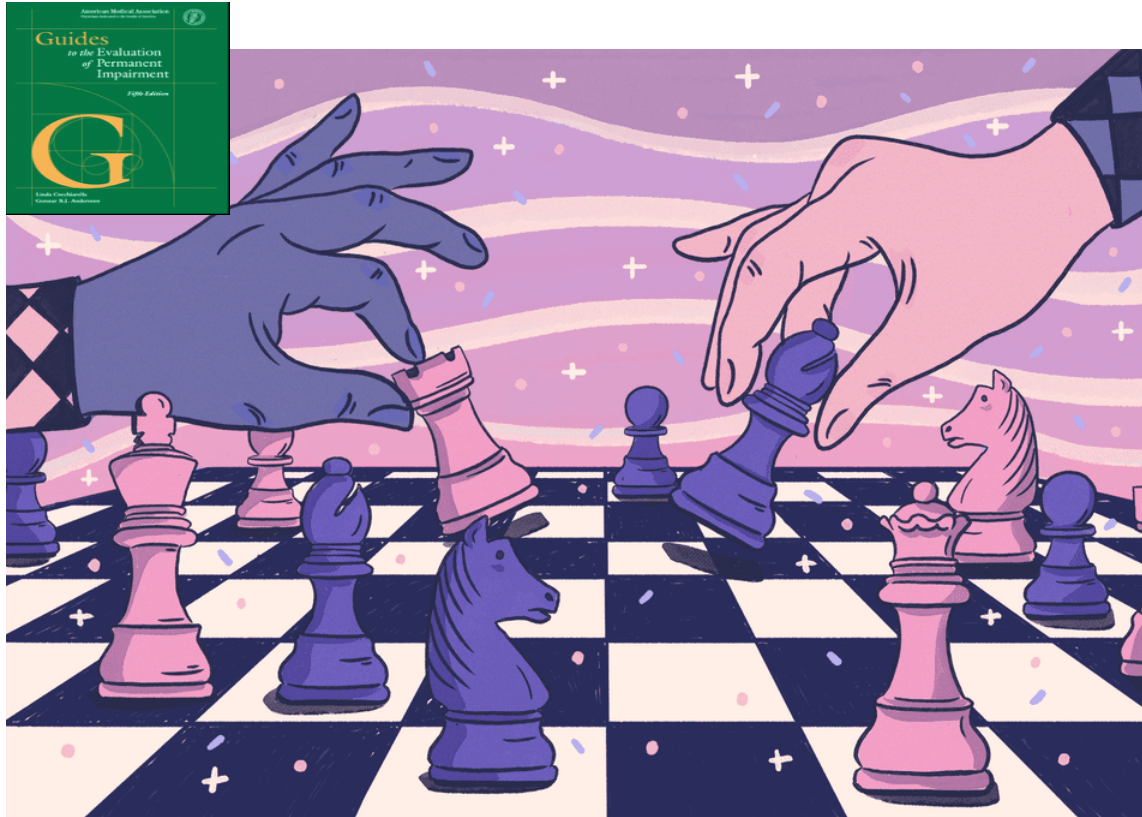


Strategies in Rating



2021 DWC Conference
Disability Evaluation Unit

Rating Problem #1

Drywall Taper (occupational group 380)

10/1/16 DOI Age 45

Fell off ladder sustained injury to Cervical spine

- Disc protrusions at C4-5 and C5-6
- Chronic neck pain
- Cervical ROM S: 20-0-15 F: 15-0-15 R: 80-0-80
- Physician rated using ROM method

ROM Method

Three Components of Impairment

- 1) Diagnosis (Table 15-7)
- 2) Range of motion measurements (Tables 15-8 through 15-14)
- 3) Nerve Deficit
 - Sensory deficit (Tables 15-15, 15-17, 15-18)
 - Motor deficit (Tables 15-16, 15-17, 15-18)

Diagnostic Component

Table 15-7 AMA Guides page 404

	Cervical	Thoracic	Lumbar
II. Intervertebral disk or other soft-tissue lesion			
Diagnosis must be based on clinical symptoms and signs and imaging information.			
A. Unoperated on, with no residual signs or symptoms.	0	0	0
B. Unoperated on, with medically documented injury, pain, and rigidity* associated with none to minimal degenerative changes on structural tests.†	4	2	5
C. Unoperated on, stable, with medically documented injury, pain, and rigidity* associated with moderate to severe degenerative changes on structural tests;† includes herniated nucleus pulposus with or without radiculopathy.	6	3	7
D. Surgically treated disk lesion without residual signs or symptoms; includes disk injection.	7	4	8
E. Surgically treated disk lesion with residual, medically documented pain and rigidity.	9	5	10
F. Multiple levels, with or without operations and with or without residual signs or symptoms.	Add 1% per level.		
G. Multiple operations <i>with</i> or without residual signs or symptoms			
1. Second operation	Add 2%		
2. Third or subsequent operation	Add 1% per operation		

Cervical ROM

Cervical Flexion Table 15-12

Degrees	Impairment
0	5
15	4
30	2
50	0

Cervical ROM

Cervical Extension Table 15-12

Degrees	Impairment
0	6
20	4
40	2
60	0

Cervical ROM

Cervical Lateral Bending Table 15-13

Degrees	Impairment
0	4
15	2
30	1
45	0

Left lateral bending 2 WP Right lateral bending 2 WP

Cervical ROM

Cervical Rotation Table 15-13

Degrees	Impairment
0	6
20	4
40	2
60	1
80	0

Left Rotation 0 WP Right Rotation 0 WP

Cervical ROM

Add ROM Impairments

Motion	WP Impairment
Flexion	4
Extension	4
Left lateral bending	2
Right lateral bending	<u>2</u>
Total	12

Combining Diagnostic and ROM

Diagnostic 7 WP

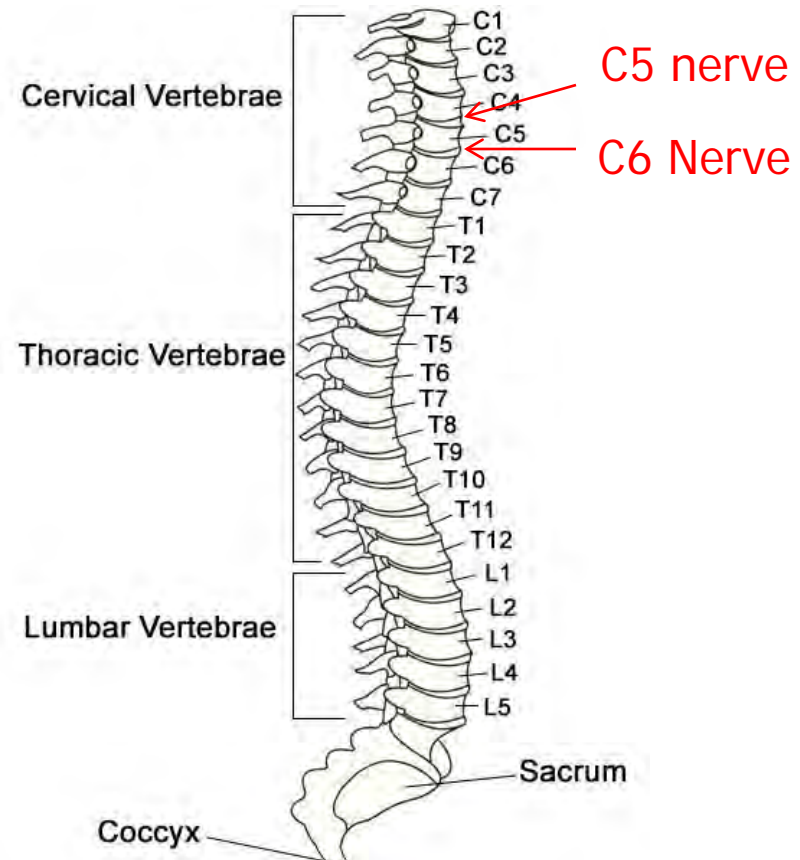
ROM 12 WP

12 C 7 = 18 WP

15.01.02.02 - 18 - [1.4]25 - 380H - 30 - 32

Neurologic Component

- Disc protrusion at C4-5 and C5-6
- Potential involvement of C5 and C6 nerves
- No mention of radiculopathy
- No neurologic impairment given



Neurologic Component

Table 15-17 Unilateral Spinal Nerve Root Impairment Affecting the Upper Extremity*

Nerve Root Impaired	Maximum % Loss of Function Due to Sensory Deficit or Pain	Maximum % Loss of Function Due to Strength
C5	5	30
C6	8	35
C7	5	35
C8	5	45
T1	5	20

* For description of the process of determining impairment percent, see text.

Why ROM Method?

Criteria for ROM Method



Multi-level Radiculopathy

Multi-level fracture

Multi-level Alteration of Motion Segment Integrity

Recurrent Radiculopathy

DRE Categories

DRE I	Subjective findings only
DRE II	Muscle guarding,/asymmetric ROM Unverified radiculopathy 5-8 WP Resolved verified radiculopathy
DRE III	Unresolved verified radiculopathy Spine surgery one level
DRE IV	Alteration motion segment integrity (fusion) Bilateral or multi-level radiculopathy (cervical thoracic spines)
DRE V	Alteration motion segment integrity With radiculopathy

Radiculopathy

Verified Radiculopathy

- Clinical findings in dermatome pattern

Numbness

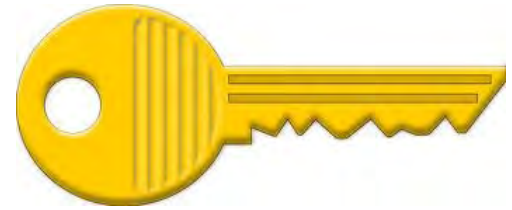
Pain

Weakness

- Corresponding imaging studies

Spine Rating Tip

Radiculopathy



Alteration of function of nerve root

Important for

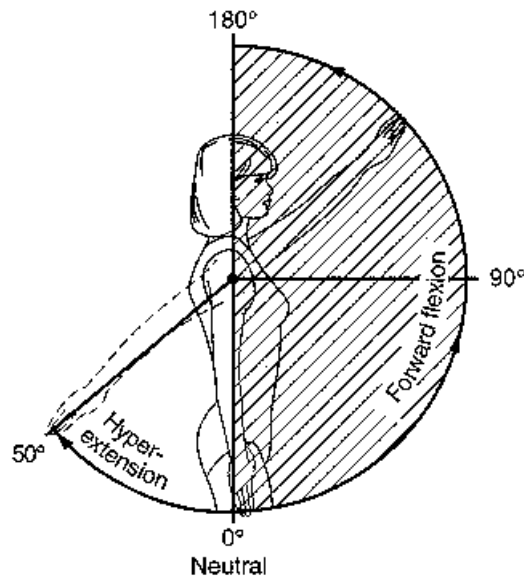
- Choice of rating method
- Placement in DRE category

Rating Problem #2

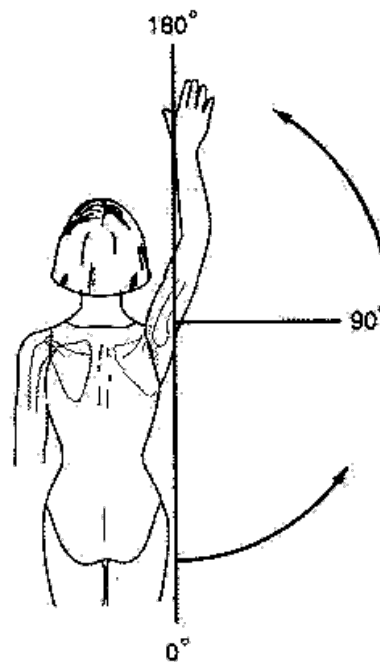
- Plumber (occupation 481) Age 30
- Right shoulder injury DOI 4/14/18
- Distal clavicle arthroplasty
- Rotator cuff repair
- ROM S:40-0-162 F:160-0-30 S:70-0-60
- Grade 4 25% deficit muscle strength all six units of shoulder motion



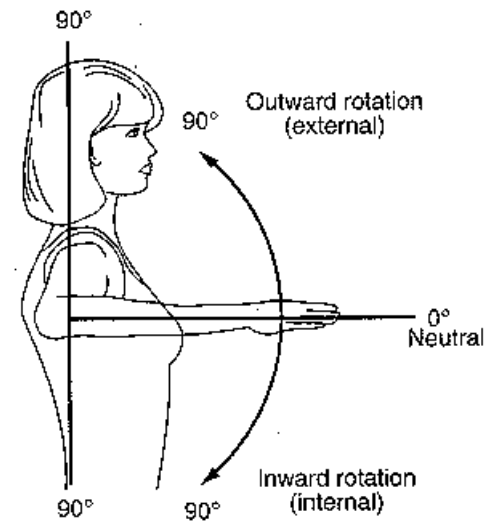
Shoulder Motions



Flexion/Extension

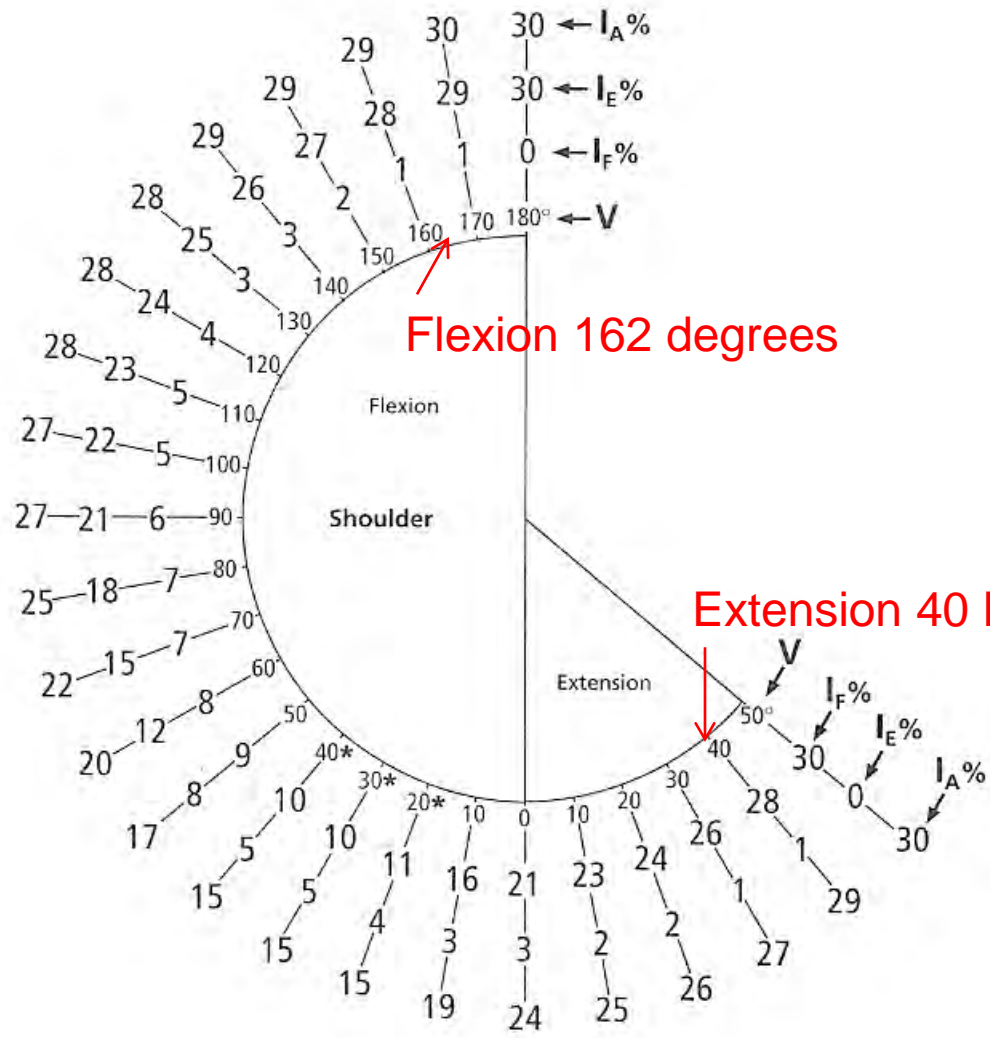


Abduction

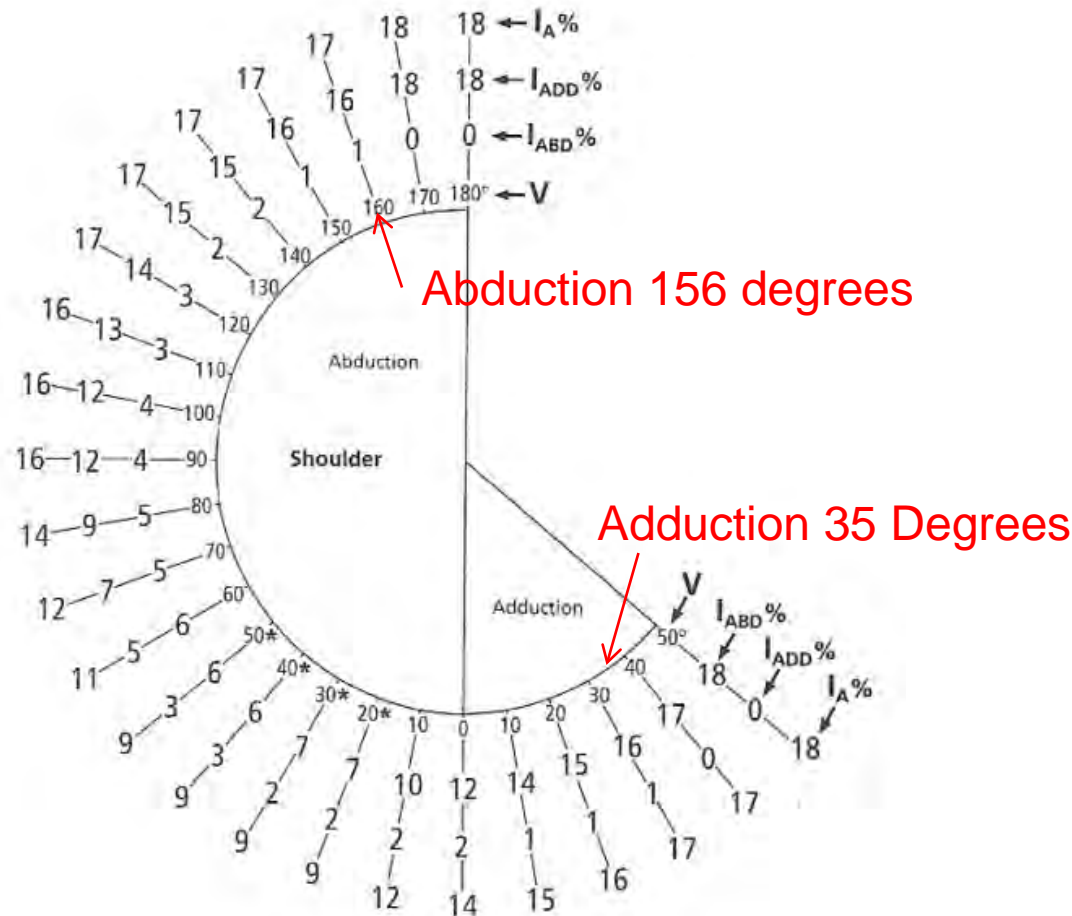


External/Internal Rotation

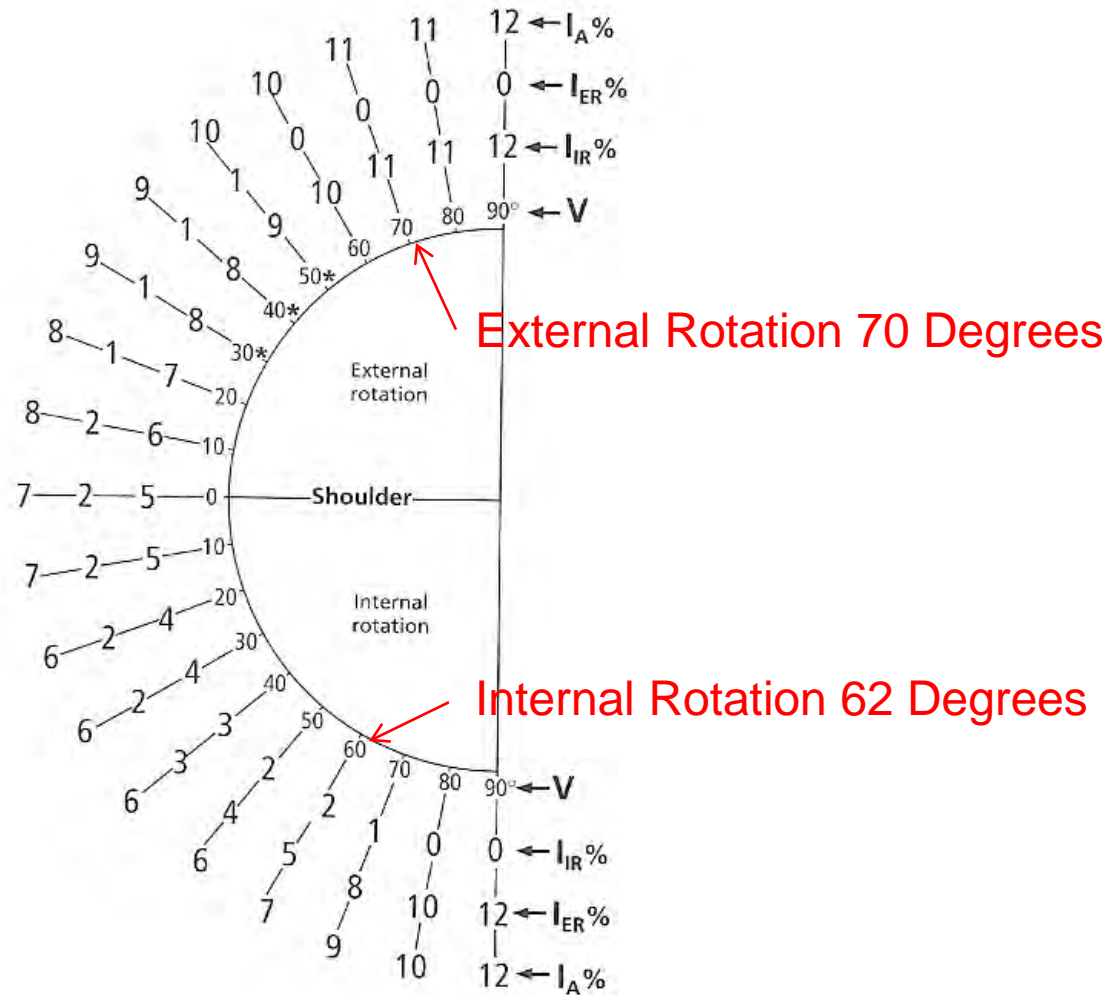
Shoulder Flexion and Extension



Shoulder Abduction and Adduction



Shoulder External and Internal Rotation

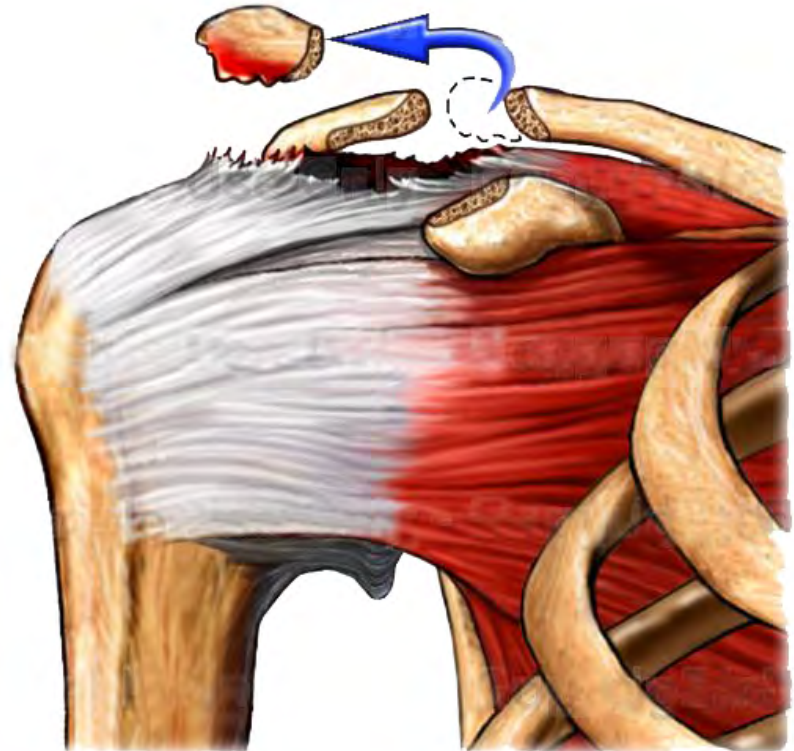


Right Shoulder ROM Impairment

Extension	1
Flexion	1
Abduction	1
Adduction	1
External Rotation	0
Internal Rotation	<u>2</u>
Total	6 UE

Distal Clavicle Arthroplasty

- Most common
- Resection
- 10 Upper Extremity Impairment per Table 16-27



An Arthroplasty by Any Other Name

Is Still 10 UE

- Distal clavicle arthroplasty
- Mumford procedure
- Distal clavicle resection
- Distal clavicle excision



Muscle Strength Impairment

Muscle Strength

Flexion 24 X 25% = 6 UE

Extension 6 X 25% = 2 UE

Abduction 12 X 25% = 3 UE

Adduction 6 x 25% = 2 UE

Int rotation 6 X 25% = 2 UE

Ext rotation 6 x 25% = 2 UE

Total = 17 UE

Table 16-35 Impairment of the Upper Extremity Due to Strength Deficit From Musculoskeletal Disorders Based on Manual Muscle Testing of Individual Units of Motion of the Shoulder and Elbow

% Upper Extremity Impairment			
Joint Relative Value	Unit of Motion Relative Value	Strength Deficit*	
		5%-25%†	30%-50%‡
Shoulder (60%)			
Flexion	24	1-6	7-12
Extension	6	0-2	2- 3
Abduction	12	1-3	4- 6
Adduction	6	0-2	2- 3
Internal rotation	6	0-2	2- 3
External rotation	6	0-2	2- 3
Elbow (70%)			
Flexion	21	1-5	6-11
Extension	21	1-5	6-11
Pronation	14	1-4	4- 7
Supination	14	1-4	4- 7

* Use clinical judgment to select the appropriate percentage from the range of values

Right Shoulder Impairment

Muscle strength combined with ROM and arthroplasty

17 C 10 C 6 = 30 UE = 18 WP

Right shoulder rating per physician

16.02.02.00 -18 -[1.4]25 – 481H - 30 –27 PD

Muscle Strength



Cannot be rated if maximum strength prevented by

- Decreased motion
- Pain
- Amputation



Muscle Strength Impairment

- Cannot be combined with other impairments unless due to different
 - Etiologic cause
 - Patho-mechanical cause



DEU Consultative Rating Annotations

- Strength impairment cannot be rated in the presence of decreased motion or pain that prevents maximum application of force
- Strength cannot be combined with other impairments unless due to different etiologic or pathomechanical cause.

Key to Strength Impairment

- Ask physician
- Cause of strength loss
- Then ask if AMA Guides page 508 preclusion apply



Rating Problem #3

Registered Nurse (occupational group 380)

11/18/15 DOI Age 60

- Right carpal tunnel surgery
- Right thumb tenosynovitis – moderate triggering
- Grip loss 69% which physician applied to thumb joint
value Table 16-18: $22 \times 30\% = 7$ WP

Right Thumb Tenosynovitis



Table 16-29 Digit Impairment Due to Constrictive Tenosynovitis

Constrictive Tenosynovitis Severity	% Digit Impairment*
Mild: inconstant triggering during active range of motion	20
Moderate: constant triggering during active range of motion	40
Severe: constant triggering during passive range of motion	60

40 DT x .4 = 16 HD x .9 = 14 UE x .6 = 8 WP

16.06.01.04 -8 -[1.4]11 – 311G- 13 – 16 PD

Table 16-34
Grip Loss

% Strength Loss	Upper Extremity Impairment
10-30	10
31-60	20
61-100	30

Right Carpal Tunnel

Is grip used to rate carpal tunnel syndrome?

No, per AMA Guides page 494

Is there a standard method to rate Carpal Tunnel Syndrome?

Yes, Tables 16-10, 16-11, and 16-15

Right Carpal Tunnel

Rating

16.01.04.00 -18 -[1.4]25 – 311F- 25 – 31 PD

Grip is not utilized to rate carpal tunnel syndrome per AMA Guides page 494. Carpal tunnel syndrome is rated using Tables 16-10, 16-11, and 16-15.

Combining PD

Grip Loss

16.01.04.00 -18 -[1.4]25 – 311F- 25 – 31 PD

R thumb Tenosynovitis

16.06.01.04 -8 -[1.4]11 – 311G- 13 – 16 PD

31 C 16 = 42 Final PD

COVID -19

- Mortality Rating 1.6%. Expect increase in death cases
- Many cases will resolve without permanent impairment
- Few cases received by DEU so PD difficult to predict

Long Term Effects and Possible Impairment

Residual Condition	AMA Guides Reference
Blood Clots	Vascular Disease Tables 4-4, 4-5
Heart damage	Cardiomyopathy Table 3-9 CHD Table 3-6a
Loss of smell or taste	1-5 WP AMA Guides page 262
Depression/Anxiety	Psychiatric GAF/SB 863?

Long Term Effects and Possible Impairment

Residual Condition	AMA Guides Reference
Lungs: Scarring, cough, shortness of breath	Respiratory Chapter 5 spirometry tests
Heart damage	Cardiomyopathy Table 3-9 CHD Table 3-6a
Fatigue	Exercise Testing in METS Table 5-12
Joint Pain	ROM Tables