DOCUMENTATION: REPORTS

MOST NOTABLE REPUTATION OF A PHYSICIAN IN TODAY’S HEALTHCARE ENVIRONMENT

ADVANCED SPINE & REHABILITATION

PRESENTER

- DR. ROGER A. RUSSELL
- BOARD CERTIFIED CHIROPRACTIC ORTHOPEDIST
- M.S. IN BIOMECHANICAL TRAUMA
- ACCIDENT RECONSTRUCTIONIST (NUTI)
- PERMANENT PARTIAL DISABILITY EVALUATIONS
- PERMANENT IMPAIRMENT RATINGS
- INDEPENDENT MEDICAL EXAMINATIONS
- INDEPENDENT RECORD REVIEWS

OFFICES

- HENDERSON, NV
  - DR. ALEX JANDA
  - DR. TROY RUSSELL
  - LAS VEGAS, NV
  - DR. ROBERT BLANCHARD
  - ST. GEORGE, UT
  - DR. ROBERT HUNTING

RED FLAGS IN CLINICAL PRACTICE

TRIGGERS FOR DEFENSE IMEs & RR’s
INADVERTENTLY COMPLICATING CASE WITH MISDIAGNOSIS
LEARNING OBJECTIVE

• UNDERSTAND THE IMPORTANCE OF DOCUMENTATION IN TODAY’S HEALTHCARE ENVIRONMENT.
• UNDERSTAND PHASES OF HEALING
• DEVELOP AN UNDERSTANDING OF THE BIOMECHANICAL ASPECTS OF NEUROMUSCULOSKELETAL INJURY.

LEARNING OBJECTIVE

• CORRELATE MECHANISM OF INJURY WITH EXAMINATION FINDINGS
• SUPPORT WORKING DIAGNOSES WITH CLINICAL EXAMINATION FINDINGS

DOCUMENTATION

REPORT WRITING
PHASES OF HEALING
DEFINITIVE DIAGNOSES
OUTCOME MEASURES
35 YEAR OLD MALE
FELL OF "WOBBLY" STAIR OF TRAILER HE IS RENTING
FELL ON OUTSTRETCHED HAND

PATIENT INTAKE FORMS
- PAIN DRAWING
- OUTCOME MEASURE
- REVIEW OF SYSTEMS
- SOCIAL HISTORY
- FAMILY HISTORY

MECHANISM OF INJURY
- 35 YEAR OLD MALE
- Fell of "wobbly" stair of trailer he is renting
- Fell on outstretched hand
MECHANISM OF INJURY

- 45 YEAR OLD MALE
- RIDING HARLEY DAVIDSON MC
- HIT BY PHANTOM VEHICLE
- FRACTURED LEG

LEARNING ACTIVITY

- GROUPS OF 4-5
- 15 MINUTES PREPARATION
- ONE SPOKESMAN PER GROUP
- 2-3 MINUTE PRESENTATION
- DISCUSSION / QUESTIONS
TYPES OF DIAGNOSES

- **SYMPTOM / PSEUDOANATOMICAL**
  - O.D., CERVICALGIA, LUMBARAG, FEVER
- **SYMPTOMS**
  - CLUSTERS OF SYMPTOMS.
- **ANATOMICAL**
  - NORM FOR MUCH OF GENERAL MEDICINE. ORGAN OR TISSUE RELATED DIAGNOSES CAN HAVE MULTIPLE ETIOLOGIES.
- **ETIOLOGICAL**
  - BASED ON CAUSES, NOT MANIFESTATIONS.

DIAGNOSES VS INJURY PATTERNS / DIAGNOSES

- **ICD-10**
  - 5Y1.80: Other intervertebral disc disorders, lumbosacral region (ICD-10: L50.8x: Disc space or vertebral body degeneration, lumbosacral region)

DIAGNOSES:
- Related to the 900-999 Injury Code Classification (ICD-10):
  1. Name post mortem vehicle versus patient collision.
  2. Cervical myopathy
  3. Lumbosacral stenosis
  4. Chronic low back pain with radicular myelopathy

  - Lumbar radiculopathy:
    - L5/S1 disc herniation
    - L5/S1 disc prolapse
  - Radicular symptoms (radiculopathy) with radicular pain
  - Radial numbness, right side
  - Clinical evidence of lumbar spinal
  - Perforated epidural

INJURY PATTERNS / DIAGNOSES

- **DIAGNOSES MUST BE SUPPORTED BY:**
  - MECHANISM OF INJURY
  - SUBJECTIVE COMPLAINTS
  - ORTHOPEDIC / NEUROLOGIC FINDINGS
DEFINITIVE DIAGNOSES

- IMPORTANCE CANNOT BE OVEREMPHASIZED
- GENERIC DIAGNOSES
  - CERVICALGIA / LUMBAGO (SYMPTOMS)
  - SPRAIN / STRAIN (GENERIC)
  - FACET MEDIATED / DISCOGENIC PAIN GENERATORS
  - RADICULOPATHY / BRACHIAL Plexopathy / PERIPHERAL NEUROPATHY / REFERRED PAIN

NEIGHBOR CONSULT

- ACUTE ONSET OF RUX PAIN
  - RT LAT ARM, RT THUMB, RT INDEX
  - NO INJURY
  - PRIOR CHIROPRACTOR TOOK AP & LAT CERVICAL X-RAYS
  - RECOMMENDED CERVICAL MRI

INJURY PATTERNS / DIAGNOSES

- C6 RADICULOPATHY
  - CERVICAL ROM WNL'S
  - BAKODY'S SIGN NOT PRESENT
  - AGGRAVATES RUX PAIN
  - SPURLING'S (-)
  - NEUROLOGICALLY INTACT
THORACIC OUTLET SYNDROME?

- REVERSE BAKODY'S SIGN (+) 
- ADSON'S (-) 
- COSTOCLAVICULAR (-) 
- WRIGHT'S (-)

ACTIVE TRIGGER POINTS

INJURY PATTERNS / DIAGNOSES

- TIMING OF DIAGNOSES?
- MYOFASCIAL PAIN SYNDROME
- TRIGGER POINTS
TREATMENT ALGORITHMS

- CONSERVATIVE 2-16 WEEKS (80%)
  - PHYSIOTHERAPY
  - MANIPULATION / MOBILIZATION
  - PHARMACOLOGIC
  - REHABILITATION / STRENGTHENING
- APPROPRIATE DIAGNOSTIC STUDIES (30%)
  - MRI, CT, NEURODIAGNOSTIC
- INTERVENTIONAL PAIN MANAGEMENT (20%)
- SURGICAL CONSIDERATIONS (2%-3%)

OTHER CONSIDERATIONS TO FOLLOW…

TREATMENT CASCADE