



Case Discussion

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Case #1

- 59 yo active staff RN in L&D with right knee injury. Significant past history of right knee meniscus surgery 2015.
- DOI: 3/10/21
- Mechanism of injury: right foot got caught under patient's bed, felt tear right knee. Immediate medial sided knee pain and difficulty ambulating.
- Treatment- Initial conservative treatment rest, cortisone injection, patella strap.
- Ortho referral, MRI 5/12/21 revealed medial meniscus tear, chondral defect of the medial condyle. Arthroscopic surgery recommended.
- Second opinion August 2021 PRP recommended.
- Denied in UR – rationale: injury less than one year old, patient is over 50 yo, no documentation failure course of PT. Medical necessity not established in accordance with current evidenced based guidelines.
- Appealed – denial overturned after discussion revealed failure prior treatment modalities, patient requests trial PRP to avoid surgery.
- PRP 9/13/21. Recommend out of work 2 weeks. Patient had set back and out of work an additional week.
- Return to ortho May 2022 with ongoing right knee pain and increasing difficulty with work.
- Repeat MRI June 2022 revealed persistent small MMT w/enlarging parameniscal cyst. Stable osteochondral injury of the medial femoral condyle.
- 8/30/2022 - Right knee arthroscopic partial medial menisectomy, debridement parameniscal cyst and chondroplasty medial femoral condyle.
- Out of work. Initiated PT 9/8/2022. Pre-op pain is improved. Ambulating independently and reciprocally managing stairs. Pain 4-5/10. AROM 0- 90 w/discomfort. VMO activation decreased.
- RTW sedentary duty 9/21/22.

Case #2

- 61 yo RHD surgical scheduler with right shoulder injury.
- DOI: 9/18/2019
- Mechanism of injury: trip and fall landing on right shoulder
- MRI revealed massive RTC tear. Surgical repair 10/2/19.
- Repeat MRI 1/15/2020 revealed massive retear supraspinatus and infraspinatus.
- March 2020 ortho recommended revision surgery w/PRP.
- Initially surgery & PRP denied in UR stating guidelines note PRP applied to the site of the RTC tendon repair did not improve healing with significantly higher failure rates w/PRP vs. control.
- PRP and surgery approved with appeal. Surgery took place 4/6/2020.
- Repeat MRI one year later, April 2021 revealed part of cuff didn't heal, complete rupture again.
- IW continues with pain and limited ROM & STR.
- Possible need for reverse total shoulder replacement.

2022

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