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INDUSTRIAL INJURIES

You are here because of an injury that occurred while working, resulting in a Worker's Compensation (WC) Claim. An OCCUPATIONAL MED doctor or PA may have already treated you. They have limited general knowledge of Orthopedic problems and typically must treat you before you see a specialist..

I have specialized expertise in Orthopedic problems of the knee, elbow and shoulder ONLY. Your employer's WC insurance has agreed to pay for all medical expenses related to this specific injury so that you do not have to use your private insurance. There a few things you need to understand regarding WC Claims and injuries.

I do not work for your employer or the insurance company. I work FOR YOU. My duty is to diagnose your problem, provide you with treatment choices so that you and I can determine the best option for you. Our goal is to resolve your pain and/or loss of function and get you back to your life and work. However, under WC rules, the insurance carrier can be involved in the decision-making process. Although their goals are really the same as ours, they have an additional obligation to the employer to insure minimal lost time from work. It is important that YOU have the same goals and actively participate in your own care and are compliant with treatment. You must be seen every 4-6 weeks while under my care and it is important that you NEVER miss an appointment or the insurance carrier may terminate your benefits.

Once under a WC Claim, the insurance carrier is entitled to know all about your current and past medical conditions, regardless of relevance. They may also have doctors of their choosing provide opinions from time to time. This usually occurs if there is a delay in returning to work given the problems being treated.

You will be given a WORK STATUS at each visit. This is required regardless of your job. This form provides information to your employer and insurance carrier (and to you) for safe guidelines for return to work. If you are not returned to FULL DUTY (all aspects of your job) you may be released to LIGHT DUTY. I will generally outline things you should not do (e.g. no overhead reaching) that would potentially cause harm to the area we are treating. This work status must be based on objective findings and known risks as it relates to your specific problem. It cannot be based on subjective experience of pain alone. ***EVEN IF YOUR EMPLOYER DOES NOT HAVE LIGHT DUTY, YOU MAY BE GIVEN A WORK STATUS THAT INDICATES YOU CAN PERFORM LIGHT DUTY.*** It is your employer's obligation to determine if they have

any job for you that fits our restrictions. If they do not, then you will usually be told not to return to work. **IT IS YOUR EMPLOYER'S CHOICE, NOT YOURS OR MINE.** If they do have a job for you, you have NO CHOICE but to go to work. **This is not a choice you get to make.** Under most circumstances, **you cannot be placed on NO DUTY status**, except for a short time after surgery, should that be needed. Any additional forms (e.g. FMLA, personal disability insurance, etc) must be given to my staff and requires a \$25 fee for completion. These forms take 7-10 days to complete so **PLAN AHEAD.**

At the end of treatment, you will be given an **IMPAIRMENT RATING (PIR).** This is a “% disability” that comes from a book entitled the “AMA Guidelines to the Evaluation of Permanent Impairment, 6th Edition”. The % you are given is defined by several physical factors or the problem itself (e.g. meniscus tear) and is **NOT INFLUENCED BY THE TYPE OF WORK YOU PERFORM.** That is, someone who has a meniscus tear (torn cartilage tear in the knee) and sits all day gets the same impairment as a person doing labor or even a professional athlete, regardless of whether they can return to their job or not. The impairment rating is used by the insurance carrier to calculate a compensation payment for you at the end of care. As a physician, I only deal with the medical aspects and do not know the process by which this is done. Please direct questions regarding payments to your insurance carrier.

Studies have demonstrated that patients with a WC claim who do not get back to work quickly, typically do not do well long term. That is, just the fact that you are on a WC claim statistically means that you have less of a chance of full recovery. We do not know why this happens but it has been shown to be true in all Western countries **REGARDLESS** of the problem or the type of job you have. **The longer you are off work, the more pronounced this factor becomes.** You will typically do 30% less well than someone without a WC claim but with a similar problem.

Once ACTIVE treatment has been completed, you may be given **SUPPORTIVE CARE** if needed. Some problems require additional follow-up to monitor a patient over a longer period of time. These visits are typically several months apart and will be specified. During this time, it allows us to give injections, obtain tests if needed, provide medicines and, on rare occasions, re-open your case for further surgery. **YOUR WORK STATUS AND PIR CANNOT BE CHANGED UNDER SUPPORTIVE CARE.** If you do not use your supportive care visits, even if you are doing great, they will terminate this benefit. Therefore, if you are awarded this benefit, it is important for you to show up at all of your appointments even just for a quick “check-up”.

Finally, there are occasions where you suffer an injury and may already have a known (or even unknown) problem, which was **PRE-EXISTING.** This is known as an “aggravation of a pre-existing problem”. The pre-existing problem is often an old injury, arthritis or other degenerative conditions, but can also be a tear that was unknown prior to the work injury. If the work injury actually made this problem worse physically (e.g. made a tear bigger, etc), then the WC injury is covered in its

entirety. If the new injury only made the symptoms of the prior problem worse, then treatment is directed toward the new symptoms and the WC claim may not cover definitive treatment of the pre-existing problem. There are some occasions where this is obvious and others where it is difficult to determine. In the latter case, other opinions may be obtained and often times the judge at the Industrial Commission of Arizona (ICA) will have to decide what is new or what is old. Everyone really does work towards what is fair and the ultimate goal is to make you better and get you back to work as quickly and safely as possible. Regardless of how you perceive the "system" it is set-up to be fair to all parties, especially the worker. For you to get better, you must understand this. My job is to make sure all parties know what needs to be done medically to get you back to work and this includes future treatments if needed.

Please check my website (www.AZISKS.com) and the Internet for more basic information your medical problem. The more you can learn about the process, the better your recovery will be. If you have questions, feel free to email me via the link on my website.

We thank you for the opportunity to take care of you and will work to help you achieve a fast and comfortable recovery and get back to the life you desire.

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