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Getting Older Claimants Back To Work

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The U.S. Workforce is Aging




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The Bureau of Labor Statistics estimates that from 2006-2016, there will be a 36.5 % increase in the number of workers between the ages of 55 and 65.



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They also predict that there will be a more than 80% increase in workers between the ages of 65 and 74 in the same time period.




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These statistics are the result of the 76 million baby boomers steadily moving through the workforce.


At the same time, workforce growth is slowing due to a poor economy, a low national fertility rate and a statistical leveling off of women in the workplace




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Older workers are valuable in that they have experience and are generally good at their jobs. They also embody a work ethic which often eludes younger workers.



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Although older workers have valuable institutional experience and knowledge to impart to their younger counterparts, they are also at greater risk for workplace injuries.



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Younger workers have more workplace injuries than their older counterparts, but those individual injuries are substantially less costly than injuries among older workers.

The four most common injuries to older workers include soft tissue injuries to the shoulder, knee, neck and lower back.




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The onset of arthritis, degenerative disc disease, low back pain & shoulder impingement are common conditions in an aging population, but physically demanding jobs can aggravate these conditions



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It is very important to refer these injured patients to a physician experienced in work related injuries & treatment.



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Physicians who are experienced in treating injured workers have refined their diagnostic and treatment skills to provide a superior cost / benefit ratio for all concerned




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Accurately diagnosing work related injuries in older patients, is particularly important.

An accurate diagnosis and subsequent treatment will aid in the claimant returning to work faster


An accurate diagnosis will also establish a realistic "baseline" for older patients. This baseline is my assessment of the patients pre-injury condition




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Managing Expectations & Predicting Outcomes


As an orthopedic surgeon, I must manage my patients expectations, i.e. tell them what we can and cannot do, and we make predictions telling them how long it will take to achieve a certain level of improvement.



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“But Doc, I’m an athlete, I need to be perfect”



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The following diagnostic steps apply to the four most common injuries which affect the aging workforce. These are injuries to the shoulder, knee, neck and lower back




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Diagnosis

Review the patient's history in detail.


Via the history, we can determine what is chronic , pre-existing, age related, what co-morbidities will affect the outcome, and also what is a result of the industrial accident



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Diagnosis

- Is there an exacerbation of a chronic or pre-existing condition?
- Is it an aggravation of a problem which is progressive?
- Is it a traumatic focal event?




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Diagnosis

Significant Co-morbidities

- Diabetes
- Age
- Is it the dominant extremity engaged in repetitive activities?
- Prior injuries or surgery?





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Diagnosis

Significant Co-morbidities



- Other underlying conditions such as rheumatoid arthritis, lupus, osteoporosis, osteopenia etc...



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Diagnosis


- Physical examination by the doctor
- Rule out other sources of pain
- X-Rays
- Magnetic Resonance Imaging (MRI)



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Diagnosis


- Good quality x-rays are crucial to diagnosis
- They will help to “date” the injury & determine if pre-existing arthritis is present
- Radiologists typically underestimate the level of arthritis present
- The level of arthritis present in an x-ray is best determined by an experienced orthopedic surgeon who reviews them on a daily basis



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**Not All M.R.I. Scanners
Are Created Equal!**

1.5 Tesla
.5 Tesla



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Treatment

Musculoskeletal pain is often successfully treated with non-surgical treatment methods

A program of physical therapy & anti-inflammatory medication is routinely recommended to relieve symptoms


Surgery is considered only if this non-surgical treatment is ineffective



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**Not All Physical Therapy
Centers Are Created Equal!**

Physical Therapists Experienced
in Treating W/C Patients Are
Essential



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Treatment

Physical Therapists, experienced in treating work related injuries, are also a critical component of returning patients to work

Their knowledge of overcoming apprehension, non-compliance and other issues common in w/c patients, are key to successful outcomes




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Treatment

When surgery is indicated, a surgeon experienced in treating work related injuries becomes exponentially important


The knowledge and wisdom acquired from years of this experience, typically translates into a more rapid return to work for the patient and improved cost / benefit ratio for the care system



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Conclusion


The aging workforce is injured less frequently than their younger counterparts, but the injuries of the aging workforce are usually more severe and therefore more costly to manage than younger worker's injuries



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Conclusion

Medical care provided by surgeons, physicians and physical therapists, who are experienced with diagnosing & treating injured workers, can result in getting older claimants back to work more efficiently and more cost effectively




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FAQ

- CPM
- Pain Pumps
- DME (slings, cryo-therapy)
- Attendant Care
- Transportation
- Pain Medication
- MMI & PPI

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Thank You

