

Case Study: Bilateral CTS and Workers' Compensation

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Repetitive motion injuries

Repetitive motion injuries result from the repeating tasks required by certain jobs. It is also referred to as RSI or Repetitive Strain Injuries or Repetitive Stress Injuries and involves the musculoskeletal and nervous systems. These injuries can result from a number of factors such as:

- awkward and sustained positions
- forceful exertions
- pressing against a hard surface (or mechanical compression)
- repetitive tasks
- vibrations

Non-specific arm pain and upper limb work-related disorders are also included where RSI's are concerned. In many cases of this nature, it is apparent that psychosocial and physical stressors play a significant role in these types of injuries.

RSI Symptoms

Patients who have been diagnosed with RSI typically experience the following symptoms:

- lack of endurance and weakness
- pain experienced in the arm, back, hands, shoulders, and/or wrists
- pain that worsens with activity

When you contrast RSI injuries with CTS injuries, the symptoms of the latter tend to be both diffuse and non-anatomical in nature. It crosses the proper distribution of nerves and tendons as well as not being characteristic of specific discrete pathological conditions.

Ms. A and her bilateral CTS case

Ms. A is a candidate for bilateral CTS surgery due to injuries incurred from a bilateral injury to her upper extremities while performing her job. Her job required a great deal of repetitive arm and hand work as she cut and made fiber optics. Despite experiencing pain in her upper extremities, she continued to work until she was no longer able to. Her employer referred her to

Dr. S who began treating her with physical therapy. When her conservative care and PT didn't relieve her pain, she was referred to Dr. B.

Dr. S splinted her arms and put her on "light duty" status. Unfortunately, there was no light duty work for her on the job and she could no longer perform regular work, so she was sent home and remains on full disability (temporary total disability) to this day. Dr. S ordered an MRI for Ms. A and it revealed that she had lateral epicondylitis partial thickness tearing in the proximal common extensor tendon. The proposed treatment is an initial surgery on Ms. A's right elbow. Once the right elbow heals, she will have surgery on her left elbow.

Ms. A is now considering whether or not to settle. On one hand, there is a high degree of uncertainty with regard to the nature, extent and future cost of future medical care. Often settlement values are higher when the insurance company is facing open ended medical costs. On the other hand, if my client settles and her future medical needs involve multiple surgeries and physical therapies, even a settlement of \$100,000 or more will not adequately compensate her. This dilemma of whether and when to settle is one of the more difficult decisions for a significantly injured workers' compensation claimant.