JOINT REPLACEMENT, PROSTHESIS (81)
HIP; KNEE; OTHER

CRITERIA → N/A → 1) Six mos. post surgery, no limitation in ambulation.
                   → 2) Period > 6 mos. Post surgery, limitation in range of motion.
                   → Period < 6 mos. post surgery → N/A

ACTION
CLEAR
CLEAR WITH RESTRICTIONS
DEFER
UNTIL:

RESTRICTIONS/DEFER
1&2) No mountainous placements. Functional limitations and distance can ambulate as recommended by personal MD. Sedentary job placement. No F/U needed

RATIONALE
Most common is hip replacement, done for arthritis, trauma or congenital conditions.

MEDICAL INFORMATION NEEDED:
Generic Information;
Functional limitations;
Ambulating abilities.

5/4/93
JOINTS: OSTEO-ARTHRITIS (715.9)
(DEGENERATIVE JOINT DISEASE)

CRITERIA
- X ray or physical exam shows degenerative joint changes without symptomatic episodes.
- Pain relieved with intermittent, non-prescription analgesics, NSAIDS, Feldene.
- Continuous use of NSAIDs.
- 1) Weight > 120% IBW involving legs, spine, hips
- 2) Inflammatory episode < 1 yr. ago.

ACTION
- CLEAR
- CLEAR WITH RESTRICTIONS
- Restrict placement to clearly stated functional capacity as defined by Application's Physician.
- MRB/MED ADVISOR

RESTRICTIONS/DEFER

RATIONALE
1) Obesity contributes to complication.
2) Unable to support needs in the field.

MEDICAL INFORMATION NEEDED:
Generic information;
If history of inflammatory episodes, request R/O rheumatoid arthritis by laboratory test: RA factor;
Functional capacity, severity of disease.

7/17/95
### KNEE: CHONDROMALACIA (717) vs. OSGOOD SCHLATTER (732.4)

#### CRITERIA

<table>
<thead>
<tr>
<th>CHONDROMALACIA</th>
<th>N/A</th>
<th>OSGOOD SCHLATTER</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Resolved with exercises &gt; 6 mos.</td>
<td>N/A</td>
<td>1) Severe pain, interferes with ADL's surgery recommended</td>
</tr>
<tr>
<td>2) Post-surgery, 6 mos and asymptomatic</td>
<td>N/A</td>
<td>2) Post surgery &lt; 6 mos.</td>
</tr>
<tr>
<td>3) Hx Osgood-Schlatter; resolved.</td>
<td>N/A</td>
<td>3) Pain controlled with continuous medication.</td>
</tr>
<tr>
<td>4) Minimal discomfort self-managed with PRN NSAIDs.</td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

#### ACTION

- CLEAR
- CLEAR WITH RESTRICTIONS
- DEFER
- MNQ

#### RESTRICTIONS/DEFER

- 1&2) Post surgery for 6-12 mos.
- 3) Minimal supply, self-managed

#### RATIONALE

- Exercise increases strength of knee ligament and decreases pain.
- Time for clearance post surgery depends on the surgery, severity of the condition, and age of patient. Clearance should be decided by Orthopedist and Physical Therapist.

#### MEDICAL INFORMATION NEEDED:

- Generic Information;
- Orthopedist consultation if symptomatic within 2 yrs;
- Activity limitations.

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**Orthopedics**

5/4/33
NON-LIGAMENTOUS INJURIES OF THE KNEE (717)
MENISCUS TEARS: MEDIAL (836.0), LATERAL (836.1), OTHER CARTILAGE TEAR (836.2)

CRITERIA
→ 1) Repaired, 2 mos. post arthroscopy or surgery, no sequellae.
→ 2) Single episode resolved
→ 3) Mildly symptomatic (mild swelling, ache)

ACTION
CLEAR
CLEAR WITH RESTRICTIONS
DEFER

RESTRICTIONS/DEFER

UNTIL:
Period of 2 mos. post arthroscopy or surgery.

RATIONALE
Defer 2 mos to determine outcome of surgery. Time is variable with individual, severity of derangement and age. Physical Therapy usually needed post surgery. Requires Individual Orthopedist and PT evaluation. Joint needs time to heal and muscle tone return.
Need to evaluate capability after joint has stabilized
In danger of severe re-injury. Treatment cannot be provided in developing countries.

MEDICAL INFORMATION NEEDED:
Generic Information;
Orthopedist evaluation, if symptomatic;
Activity limitations.
KNEE: LIGAMENT INJURIES, OTHER (844.9) AND REPAIR ANTERIOR CRUCIATE LIGAMENT (ACL) INJURY AND REPAIR (80)

CRITERIA

1) Single episode, other than ACL sprain, resolved.
2) ACL injury, treated with physical therapy 6 mos. post-Injury, no disability.
3) ACL or ligament injuries 1 yr. post surgical reconstruction no disability.

1) Ligament injury, resolved with therapy 6 mos., or surgery 1 yr., mildly symptomatic (mild swelling, ache).
2) Loose knee (ligament stretched or deficient), full function at ADL.

1) ACL or other ligament injuries period < 1 yr. post reconstruction surgery.
2) Significant pain or instability post-Injury.

ACTION

CLEAR
CLEAR WITH RESTRICTIONS
DEFER
MNQ

RESTRICTIONS/DEFER

1&2) No mountainous placements. Restrictions as specified by orthopedist.

RATIONALE

Two-thirds of Individuals recover from ACL Injury without disability.

MEDICAL INFORMATION NEEDED:

Generic Information;
Orthopedist evaluation, if symptomatic or loose knee (Instability);
Activity limitations.