

**SHOULDERMD**

**PAUL B. ROACHE, M.D.**

BOARD CERTIFIED ORTHOPEDIC SURGEON

**Orthopedic Specialty Care with  
Workers' Compensation Insurance**

## Overview of Dr. Roache's Orthopedic Specialty Care

**Dr. Paul B. Roache M.D.** specializes in arthroscopic shoulder surgery for rotator cuff injury. He is a leader in advancing tendon regeneration using the revolutionary Regeneten bioinductive implant to repair complicated cases of rotator cuff tears. His current research focusses on cutting edge surgical techniques, and is a leading expert in superior capsule repair to improve and enhance post surgical outcomes.

Dr. Paul Roache is board certified by the American Board of Orthopedic Surgeons (ABOS) and is a fellow in the American Academy of Orthopedic Surgeons (AAOS). He is an active member of the Arthroscopic Association of North America (AANA), The European Shoulder Association (ESA/ESSKA), and the International Society of Arthroscopy, and Knee Surgery and Orthopedic Sports Medicine (ISAKOS). Paul B. Roache MD completed a Fellowship in Shoulder and Upper extremity Surgery in San Francisco and a subspecialty AO Fellowship in Rotator Cuff Surgery in Zurich, Switzerland. In addition, he is Associate Faculty in Shoulder Arthroscopy at the Orthopedic Learning Center of AAOS/AANA in Rosemont, Illinois.

### Practice Focus

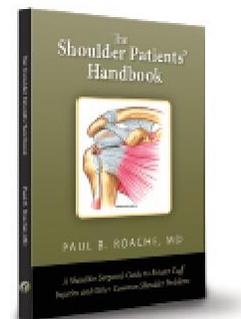
Dr. Roache is a specialist in arthroscopic surgery of the shoulder. His practice is focused on rotator cuff Injuries, shoulder dislocations, frozen shoulder, and sports medicine injuries of the shoulder. More specifically, he is focused on joint preservation, functional restoration and tissue regeneration.

In pursuit of excellence in surgical care for his patients, he has developed an opiate sparing pathway and an integrative approach to maximize his patient's recovery. Dr. Roache's philosophy is to apply a balance between both minimally invasive surgical treatments and nonsurgical treatments. His practice offers a multimodal approach toward your shoulder care, using both traditional and non-traditional modalities such as physical therapy, chiropractic, Chinese Medicine, acupuncture, and yoga to lower post-op pain.



Author of The Shoulder Patients' Handbook

*A Shoulder Surgeon's Guide to Rotator Cuff Injuries and Other Common Shoulder Problems*



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## Introduction

Welcome to ShoulderMD! Dr Roache and his team are committed to providing you the highest standard of orthopedic care in order to treat your injury.

### Workers' Compensation Overview :

If you get hurt on the job, your employer is required by law to pay for workers' compensation benefits. You could get hurt by:

- **One event at work.** Examples: hurting your back in a fall, getting burned by a chemical that splashes on your skin, getting hurt in a car accident while making deliveries. or:
- **Repeated exposures at work.** Examples: hurting your hand, back, or other part of the body from doing the same motion over and over, losing your hearing because of constant loud noise.

Workers' compensation benefits can include:

- **Medical Care.** Paid for by your employer, to help you recover from an injury or illness caused by work. This includes doctor visits and other treatment services, tests, medicines, equipment, and travel costs reasonably necessary to treat your injury.
- **Temporary Disability Benefits.** Payments if you lose wages because your injury prevents you from doing your usual job while recovering.
- **Permanent Disability Benefits.** Payments if you don't recover completely and your injury causes a permanent loss of physical or mental function that a doctor can measure.
- **Supplemental Job Displacement Benefit.** A voucher to help pay for retraining or skill enhancement if you are eligible to receive permanent disability benefits, your employer doesn't offer you work, and you don't return to work for your employer. This benefit is available for workers injured in 2004 or later. If your injury also occurred in 2013 or later and you received a Supplemental Job Displacement Benefit, you may also be eligible for an additional, one-time payment under the Return-to-Work Supplement Program.
- **Death Benefits.** Payments to your spouse, children, or other dependents if you die from a job injury or illness.

## Overview of Orthopedic Care

### Overview of orthopedic care in the California Workers' Compensation system

- Doctor-ordered care will need to be authorized (or “certified”) by Workers’ Compensation Insurance Company.
- Doctor visits and reports are required every 30-45 days. If you are on “Modified Work,” some employers require reports every 2 weeks.
- If doctor-ordered care is not authorized, you should check with your adjuster or case manager. In some cases, patients will be represented by attorneys to assist with planning care.
- When treatment is completed, you will no longer need to be seen as regularly, and future medical care (please refer to Common Terminology on page 10) can be scheduled at a later date. This will be outlined in the doctor’s final report. (Workers’ Compensation refers to this as “Permanent and Stationary Report” or “PR-4 Report”.)
- Sometimes, either the patient or the insurance company will request an independent evaluation called a “Qualified Medical Examination” (QME). This is very common and is independent of treatment. It can be requested at any time, but patients often find it useful if there is a delay in getting treatment approved.

### What is an orthopedic surgeon?

An orthopedic surgeon is a doctor who specializes in surgical and non-surgical treatments of muscle, tendon, nerve, bone and joint injuries. The primary role of the orthopedic surgeon is to determine the nature of your injury and give you a precise diagnosis and treatment plan.

### What is the role of the orthopedic surgeon in the Workers' Compensation Clinic?

Dr. Roache, your orthopedic surgeon, will determine if your injury requires surgery. He will discuss all treatment options with you, surgical and non-surgical, and give you a comprehensive treatment plan. If your care requires the direct supervision of an orthopedic surgeon, Dr. Roache will manage your care until it is completed.

## Important Appointment Details

### Becoming a ShoulderMD patient

Worker's compensation requires a referral from a treating provider and authorization from the insurance company in order to be evaluated and treated by an Orthopedic Specialist. Upon authorization, your relevant documentation is sent to our office.

The ShoulderMD Patient Intake Coordinator will confirm your injury and workers' compensation claim information. The Intake Coordinator will gather clinical documentation, imaging reports and visuals, as well as any documentation related to your claim. We will also gather:

- Drivers License or valid ID
- New Patient Questionnaire
- Shoulder Patient Questionnaire
- Consent for Treatment
- List of medications

In order to assure we are well prepared for your first visit, most patients will have an initial clinical evaluation with our Nurse Practitioner to review your medical history. Patients will be assigned and introduced to a personal Patient Care Coordinator who will be your point person throughout your treatment. At this time, your Initial visit will be scheduled with one of our providers. Initial visits are most commonly held via Telehealth.

### Appointment types

ShoulderMD provides in-person and telehealth services for patients

- **Telehealth:** offers flexibility and convenience for our patients Telehealth visits enable video or phone appointments between a patient and the provider. During your telehealth visits, we request you are in a quiet location, with your phone/computer placed in an area where the provider can see your movement. Your Patient Care Coordinator will send a Zoom Meeting Link shortly before the appointment time.
- **In-office:** We have multiple offices for our patients to be seen throughout the Bay Area. Dr Roache will evaluate each patient to identify when In-Office visits are required. Please arrive 15-20 minutes earlier than your scheduled appointment to ensure prompt care.

### How to make a follow up appointment

Dr. Roache will provide you with a treatment plan consistent with your diagnosis. You will be given instructions for when to follow up with the doctor during your visit. Your Patient Care Coordinator will confirm this as your appointment ends.

Attending your appointments is extremely important. If you cannot make an appointment, please contact the clinic and reschedule. If you miss appointments and we are unable to reach you, this may cause problems with your care. The adjuster may conclude that you are not compliant in your care and close the case. This is easily avoided by contacting us at the clinic.

**Medications**

Medications are prescribed as necessary. These may be dispensed from the clinic or written for your pharmacy. Narcotic pain medications may be needed to help with severe pain before and after surgery. There are clear FDA guidelines for appropriate and safe use of these medications. If a situation arises where there is a question about the appropriate and safe use of narcotic pain medications beyond the usual orthopedic patient demands, consultation and treatment by a pain management specialist will be required.

## Modified work and work restrictions

During your recovery, it may not be possible to perform the regular duties of your job. These are the duties your job required you to perform before your injury. The requirements of your regular work are reviewed at the initial consultation with Dr. Roache.

### **The goals of “work modifications” and “work restrictions” are to:**

1. Protect you from further injury;
2. Allow you to heal and recover from the injury while under treatment;
3. Permit you to continue working and earn your full salary;
4. Demonstrate to your employer that you are able, available and willing to work, albeit it with restrictions to your usual duties.

If the employer does not follow the doctor-ordered work restrictions, they are in violation of the California Labor Code. You will need to notify your adjuster and the Human Resource Department at your place of employment. If you have a case manager or attorney, you must notify them as well.

### **Rules of work status modifications \***

The doctor’s role is to determine which duties of work you are able to perform without furthering the injury, and while allowing you to heal and recover during treatment.

The employer must determine if they have work that meets these modifications. If they are able to accommodate the restrictions, they will have you return to work. If they are not able to accommodate the restrictions, they will place you off work. If the employer does not follow the restrictions, you must notify your Human Resources department and your adjuster. If you have a case manager or attorney, you must notify them as well.

\* Some employers will have time limitations for how long modified work is available. Check with your employer to make sure you understand your situation.

### **How restrictions are specified**

The typical format for applying work restrictions is based off of an 8 hour work day and 40 hour work week. While this does not cover all types of employment, it is the accepted basis for determining restrictions.

Specific actions at work are addressed (e.g., “no lifting over 10 lbs.”). General restrictions such as “may work 6 hours of regular” or “may perform 75% of usual work” are not made, even if the employer requests such restrictions.

### **How long can you be on modified work?**

Work restrictions or modified work is only appropriate for a short period of time. Depending on your injury and diagnosis and your treatment this period of time may be anywhere from a few days to six months. There are strict guidelines that apply to when modified work is appropriate and how long it is appropriate. Once you exceed the time interval that is appropriate for work restrictions, the employer may request an evaluation by a neutral MD to determine your level of ability to work on the WC guidelines. If this happens it is binding. In order to avoid this, being on modified work for

as little time as necessary for recovery is advisable.

### **Returning to regular work without restrictions – general guidelines**

You will return to work without restrictions as treatment progresses. Some pain or discomfort may persist when you first return to unrestricted regular work. Often a “trial of regular work” is given when a patient first returns to unrestricted duty.

Sometimes, even if the doctor deems it safe to go back to regular work with no restrictions, the patient may not agree. In these situations, there are several ways to resolve the discrepancy. A QME can be requested, you can transfer to a different doctor, or you can contact your attorney if you have one.

### **What happens if you are unable to return to work without restrictions?**

The goal is to treat the injury and return to work without restrictions. However, this is not always possible. In these cases, the restrictions become permanent. Permanent restrictions can affect your ability to return to your present job and will affect the types of jobs you are able to get in the future.

### **Completing care**

When you have completed all the medical care that was necessary for you to recover from your injury, this is considered the end of medical care. This is otherwise known as maximum medical improvement, or MMI.

At this point you will be released or graduated from orthopedic care, and you will not be required to come back for follow-up visits with Dr. Roache. You will be moved to a category called “future medical care.” In this category, if you have trouble or questions related to the injury, you will make an appointment directly with Dr. Roache. You can make this appointment whenever you need it.

The details of future medical care are outlined by Dr. Roache in your final report. In Worker’s Compensation this report is called a “PR 4 report” or “permanent and stationary report.”

## Common Terminology

- **Primary Treating Physician:** The general doctor or practitioner who is overseeing your care. They will usually refill your medications and determine if work modifications are needed. If your care has been transferred to Dr. Roache, he is designated as your Primary Treating Physician.
- **Adjustor:** The agent for the insurance company who is responsible for monitoring your care. If you are having administrative difficulties (such as not receiving compensation or not getting care approved) your first step should be to contact your adjustor.
- **Nurse Case Manager:** The nurse who is assigned to ensure that appropriate care is being given in a timely manner. Nurse Case Managers can be very helpful in getting authorization for care.
- **Work Status:** Any work functions you are currently performing are called your “Work Status”. For example, you may have lifting restrictions of 10 lbs. If your employer is able to accommodate those restrictions, then you are “working with restrictions”. If they are not able to accommodate those restrictions, then you are “not working because modified duty is not available”.
- **Maximum Medical Improvement (MMI):** Your highest level of improvement after all necessary care has been completed.
- **Permanent and Stationary:** When all necessary care has been completed and you have reached your highest level of improvement (called “Maximal Medical Improvement”, or MMI), then you will not need care as regularly. You are given a “Permanent and Stationary” (or PR-4) status. However, most patients are given a “Future Medical Care” status (see below).
- **Future Medical Care Status:** When you no longer require on-going care, most patients are placed in the “Future Medical Care” category. This means you can seek medical care in the future, as needed.

## Clinical Research Participation

You may be asked to participate in Dr. Roache’s clinical research. This is completely voluntary and will not affect your care in any way. Participation is anonymous. It involves answering a series of surveys which track levels of pain, motor function, and overall wellbeing over the course of your treatment.

## Office Contact Summary

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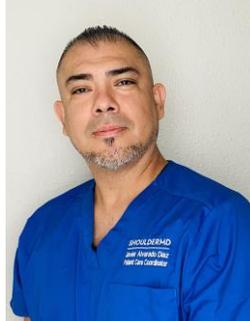
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