

**The 21st Texas Workers' Compensation
Educational Conference**

Official Disability Guidelines Overview

TDI-DWC

By Matt Zurek

Official Disability Guidelines

[Search](#)

[Contents](#)

[Keyword Index](#)

[ICD-9 Index](#)

[Contact Us](#)

[Help](#)

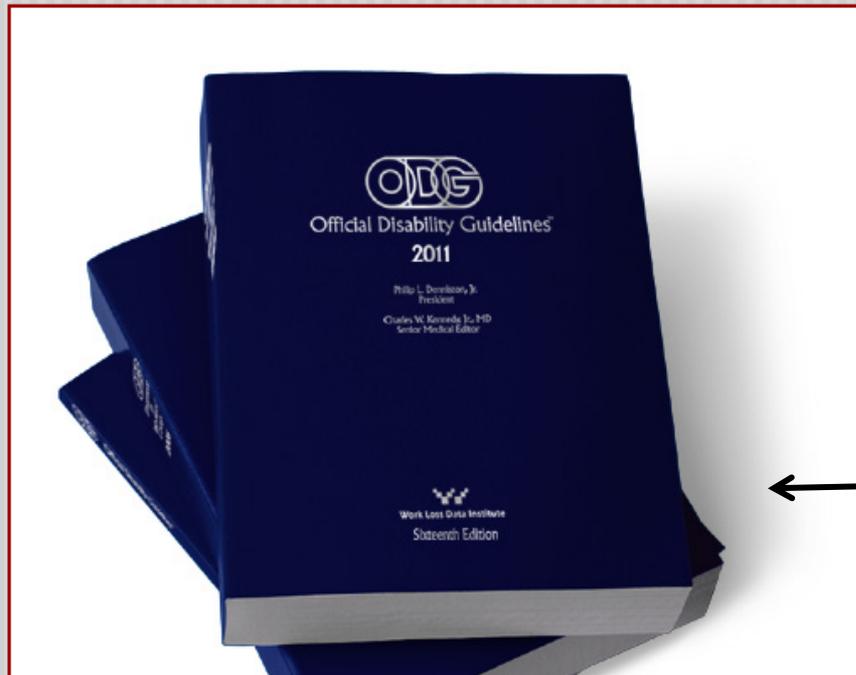
Official Disability Guidelines

[ODG: Good to Go!](#) (link to complimentary online self training tool)

Return To Work Guidelines (2011 *Official Disability Guidelines*, 16th edition)

Integrated with Treatment Guidelines (*ODG Treatment in Workers' Comp*, 9th edition)

(Click on picture of books below to enter site)



**Click Book
to Open
Guidelines**

**The 21st Texas Workers' Compensation
Educational Conference**

Official Disability Guidelines

CONTENTS

Section A (Treatment Guidelines)

I. [ODG Treatment Index](#)

II. [ODG UR Advisor](#)

III. [Drug Formulary](#)

Section B (Return-to-Work Guidelines, including links to the Treatment Guidelines)

I. [ICD-9 Index](#)

II. [Keyword Index](#)

III. [CPT® Index](#)

IV. [Comorbidity Calculator](#)

Section C (Impairment Guidelines)

I. [IAIABC Contents](#)

Click to open
Treatment Index



Official Disability Guidelines

CONTENTS

[Background & Description](#)

[Explanation of Medical Literature Ratings](#) (updated 08/05/10)

[Ankle & Foot](#) (updated 12/17/10)

[Burns](#) (updated 05/05/10)

[Carpal Tunnel Syndrome](#) (updated 12/07/10)

[Elbow](#) (updated 12/20/10)

[Eye](#) (updated 11/24/10)

[Fitness for Duty](#) (updated 05/12/10)

[Forearm, Wrist, & Hand](#) (updated 12/20/10)

[Head](#) (updated 12/15/10)

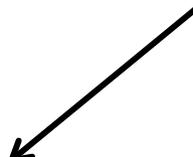
[Hernia](#) (updated 07/27/10)

[Hip & Pelvis](#) (updated 11/12/10)

[Knee & Leg](#) (updated 11/26/10)

[Low Back](#) (updated 01/14/11)

Click here to enter
procedure summary



Official Disability Guidelines

ODG - TWC

ODG Treatment

Integrated Treatment/Disability Duration Guidelines

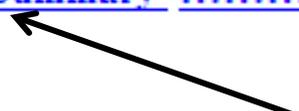
Low Back - Lumbar & Thoracic (Acute & Chronic)

[Back to ODG - TWC Index](#)

(updated 01/14/10)

CONTENTS

(1) Treatment Planning	2
(2) Codes for Automated Approval	6
(3) Procedure Summary	8

 Click here

Official Disability Guidelines

Procedure Summary – Low Back	
Procedure/topic	Summary of medical evidence
Click to jump ahead: A B C D E F G H I K L M N O P R S T U V W X Y	
Abobotulinum toxinA (Dysport)	See Botulinum toxin .
Activity restrictions	See Work .
Acupuncture	<p>Not recommended for acute low back pain. (Tulder-Cochrane, 2000) (Furlan-Cochrane, 2005) Recommended as an option for chronic low back pain in conjunction with other interventions. (See the Pain Chapter.) Acupuncture has been found to be more effective than no treatment for chronic low back pain, but the evidence for acute back pain does not support its use. (Furlan-Cochrane, 2005) (Manheimer, 2005) (van Tulder, 2005) (Thoma, 2007) (Haake, 2007) (Santaguida, 2009) These authors have reported that acupuncture provides a greater effect than sham treatment, while other studies have found no difference between the two modalities. (Brinkhaus, 2006) In this latter case, both modalities were shown to be more effective than no treatment. (Haake, 2007) Acupuncture has been shown to be better than other treatment (either conventional or alternative) in terms of pain or function. Acupuncture has been shown to add to the benefit of other treatment (improving pain and function) when compared to conventional therapy alone. (van Tulder, 2005) (Manheimer, 2005) (Furlan-Cochrane, 2005) The evidence is mixed, with some lower-quality trials producing positive results, but trials with higher validity scores tending to be negative or inconclusive. (Tulder-Cochrane, 2000) (Cherkin, 2001) (van Tulder-Spine, 2005) (Giles-Spine, 2003) (Muller, 2005) (Airaksinen, 2006) A recent RCT comparing usual care to acupuncture plus usual care found that at 24 weeks patients were significantly more likely to report 12 months pain free and less likely to report they required use of medication for pain (after only 11 weeks beginning of the protocol). (Thomas, 2005) Note: This recent Thomas study prompted the UK Health Tech Assessment to recommend a systematic review of randomized controlled trials concluded that acupuncture versus no treatment, and as an adjunct to conventional care for chronic LBP. (Yuan, 2008) This recent quality RCT concluded that actual or sham acupuncture appear to be equally effective for low back pain. (Cherkin, 2009) For an overview of acupuncture and other conditions in which this modality is recommended, see the ODG Acupuncture Guidelines. The benefit of acupuncture is conflicting, with higher-quality trials showing no benefit. (Kinkade, 2007) According to a recent NEJM review, the evidence regarding the role of the placebo effect in acupuncture, and the most recent well-powered clinical trials of acupuncture for chronic low back pain, acupuncture was as effective as real acupuncture. The simplest explanation of such findings is that the specific therapeutic effects of acupuncture are mostly attributable to contextual and psychosocial factors, such as patients' beliefs and expectations, attention, focused, spatially directed attention on the part of the patient. (Berman, 2010) This passive intervention should be an adjunct to active rehabilitation.</p> <p>ODG Acupuncture Guidelines: Initial trial of 3-4 visits over 2 weeks With evidence of objective functional improvement, total of up to 8-12 visits over 4-6 weeks (Note: The evidence is inconclusive for repeat course of therapy.)</p>

Official Disability Guidelines

ODG Training Options:

<http://www.worklossdata.com/odgtraining.htm>

Official Disability Guidelines

For information on Official Disability Guidelines:

<http://www.worklossdata.com/>