



Volume 4 • Issue 4 • Fall 2014

# No Bones About it Did You Use It Wisely?

by **David E. Ede, MD**  
**President, WVOS**

I chose Election Day to write this message (today is November 4, 2014) because I feel it symbolic of the message I wanted to get out. By now, the ballots have been counted and the spoils awarded to the victors. Those who garnered the majority of the votes for their elected office will be either re-elected or assume their new position as the person who will vote for you for the legislation that may change the way you live. This is the beauty of our society. Although we may not have an individual voice in these legislative proceedings, you (or we) have chosen an individual to vote for us, to make the decisions on policy, etc., that we would want made. It is a very important task to make decisions that will affect people, most of whom they have never met. I hope you used your vote wisely.

The office of President is NOT one of the offices up for grabs this year. But the mid-term elections do have certain

significant national consequences. Especially in the Wild and Wonderful state in which we live. One very important Senate seat (vacated by Jay Rockefeller) will have a new occupant decided by this election. We will have a new congressional representative for district two, not to mention the tightly contested remaining seats in Washington, D.C. These elected officials will determine how much gets done in the remaining two years of Barack Obama's Presidency. And, they will most certainly have a role in the upcoming Presidential race of 2016. I hope you used your vote wisely.

There are a few truisms that always come about on Election Day.

First, there is always a surprise. Despite all of the predictions and pundit opinions, the unexpected will happen. Some underdog will take an office that the polls got wrong. This speaks more to the uncertainty of polling systems and voters that flip their votes

**Vote wisely** Continued on page 7

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# The View From K2

**“If you wake  
up and you’re  
not in pain, you  
know you’re  
dead.”  
-Russian  
proverb**

Opioid addiction and prescribing is a crisis in West Virginia. As a state, we rank THIRD in the U.S. in the number of narcotics prescribed. Nationwide, orthopaedists are the THIRD largest prescriber of narcotic. This past year the number of nationwide overdose fatalities has surpassed those killed in auto accidents. This problem has been caused by two major factors: pharmaceutical companies’ aggressive marketing of these medications, and in 1997 when the Joint Commission incorporated the fifth vital sign of pain. Due to physician inactivity and apathy, politicians have tried to intervene in an attempt to alleviate this problem. They cannot do this alone, physicians (orthopaedists included) must deliberate the pros and cons before authoring these scripts.

A prospective randomized study performed in the Netherlands on ankle fractures revealed that opioids were no more effective than non-narcotic options for pain control. To date, there have been NO evidence-based medicine studies that demonstrate narcotics benefit chronic pain patients. This is truly an American problem, because 80% of all narcotics manufactured in the world are used by 5% of the world population--US!

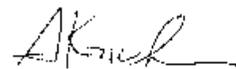
How can we as a state society address this problem? At the AAOS Fall  
2

Meeting several solutions were proposed:

- Standardization of post-op pain control;
- STRICT office policies for prescribing outpatient narcotics;
- The operating surgeon calls the patient him/herself the first post-operative day;
- Preoperative discussions with patients regarding pain control during their hospital stay; and
- Use prescribing drug monitoring programs to prevent potential patient abuse putting them at risk for overdose.

In our state, many of the patients we treat emergently or electively for an orthopaedic problem already are addicted to narcotics. This really complicates our treatment of these individuals. It is extremely important to deal with this problem in your first contact with the patient to clearly outline your involvement in prescribing narcotics. By being proactive these problems may be lessened. In conclusion, ‘hillbilly heroin’ is extremely dangerous to society at large. As a professional society, we must be active in stemming this costly epidemic that has ruined thousands of lives and hundreds of communities.

Happy reading,



Greg Krivchenia, M.D.  
AAOS Councilor

# WVOS Membership Open to Allies

Under the new West Virginia Orthopaedic Society (WVOS) bylaws, approved by the membership in 2013, allied health professionals can now become associate members of the Society.

We are asking all WVOS members to request a copy of the new membership brochure at [wvos@frontier.com](mailto:wvos@frontier.com), print it and share it with licensed health professionals in your office, your referral circle and your community, then offer to sponsor them for WVOS membership.

This opportunity is available to all health professionals who treat musculoskeletal diseases and are duly licensed by their profession's licensing board in West Virginia. Associate members may include chiropractors, nurses, orthopaedic technicians, physical therapists, physician assistants and podiatrists.

Associate members are entitled to all rights and privileges of the society, including discounts at the annual "Spring Break" conference, but can't hold office or vote. Non-orthopaedic associate members will pay dues at half the WVOS active member rate. Associate members must be sponsored for membership by an active member of the West Virginia Orthopaedic Society.

To join the WVOS, allied health professionals should do the following:

Not an  
Orthopaedic  
Surgeon?



No problem!

The West Virginia  
Orthopaedic Society  
is now offering  
**associate membership to  
all licensed licensed  
health professionals  
treating musculoskeletal  
disease in West Virginia.**

- identify an active WVOS member to sponsor you;
- visit [www.wvos.org](http://www.wvos.org) and click the join button;
- select associate member status;
- pay dues through PayPal online or by check; and
- **become active in WVOS.**

We feel that these additional professionals will provide a win-win situation for WVOS members by introducing new voices and sharing our best practices with others treating musculoskeletal disease.

WVOS is now  
open to allied  
health  
professionals,  
so please  
request our  
brochure and  
share it with  
others.

# Top Ortho ICD-10 Codes Cards Out

**ICD-10 is  
coming.  
Let us help you  
prepare!**



The West Virginia Association of Orthopaedic Executives (WVAOE) is pleased to offer orthopaedic surgeons a new tool to help them and their staff transition from ICD-9 to ICD-10.

These comprehensive ICD-10 Reference Cards have been developed on nearly 500 of the most common orthopaedic conditions in the following areas:

- Shoulder and Elbow Fractures
- Other Shoulder and Elbow Conditions
- Hip and Knee Fractures
- Other Hip and Knee Conditions
- Wrist and Hand Fractures
- Other Wrist and Hand Conditions
- Ankle and Foot Fractures
- Other Ankle and Foot Conditions
- Spine Fractures
- Other Spine Conditions

A must for a busy orthopaedic practice, the 10 reference cards were developed for viewing at a glance and are laminated for durability, but they also still allow you to write on the cards to add your notes or additional orthopaedic conditions. These Reference Cards will be a quick reference for you and your staff and save you valuable time as you transition to ICD-10.

The Reference Cards were distributed at the California Orthopaedic Association (COA) 2014 Annual Meeting and they were well-received by orthopaedic practice managers and surgeons. COA worked with Newport Medical Solutions to develop the Reference Cards. Newport Medical Solutions retains copyrights to the Reference Cards and they are responsible for their content. We urge you to consider these Reference Cards.

**Learn all about  
ICD-10  
Friday, April 17, 2015,  
as part of the  
WVAOE/WVOS  
Spring Break Meeting  
at Stonewall Resort.**

# Place Your ICD-10 Card Order Today

## ICD-10 Reference Cards

WVOS/WVAOE Members: \$50 USD per set

Non-members: \$60 USD per set

Reference cards are needed by: \_\_\_ ASAP \_\_\_ Specific date

Name: \_\_\_\_\_

Phone : ( \_\_\_\_\_ ) \_\_\_\_\_

Practice Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Method of Payment:

Check enclosed for \$ \_\_\_\_\_

Email or mail completed order form to: WVAOE, PO Box 13604, Charleston, WV 25360. Email: [wvaeo@frontier.com](mailto:wvaeo@frontier.com)

Place your order today by using this form.



**NEWPORTMED**  
SPECIALTY HEALTHCARE MANAGEMENT

**Top Orthopedic  
ICD-10 Codes**

**Shoulder & Elbow**

<p><b>Dislocations of Shoulder</b></p> <table border="1"> <tr><td>M19.01</td><td>Primary</td></tr> <tr><td>M19.11</td><td>Post-traumatic</td></tr> <tr><td>M19.21</td><td>Secondary</td></tr> </table> <p><b>Dislocations of Elbow</b></p> <table border="1"> <tr><td>M19.02</td><td>Primary</td></tr> <tr><td>M19.12</td><td>Post-traumatic</td></tr> <tr><td>M19.22</td><td>Secondary</td></tr> </table> <p><b>Shoulder Instability</b></p> <table border="1"> <tr><td>M75.11</td><td>Rotator cuff, incomplete</td></tr> <tr><td>M75.12</td><td>Rotator cuff, complete</td></tr> </table> <p><b>Joint Pain</b></p> <table border="1"> <tr><td>M25.51</td><td>Pain in shoulder</td></tr> <tr><td>M25.52</td><td>Pain in elbow</td></tr> </table> <p><b>Ulcers Affecting Joint</b></p> <table border="1"> <tr><td>M24.01</td><td>Shoulder</td></tr> <tr><td>M24.02</td><td>Elbow</td></tr> </table> <p><b>Sprain of Shoulder</b></p> <table border="1"> <tr><td>S43.42</td><td>Sprain of rotator cuff</td></tr> 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<p><b>Subluxation and Dislocation of Elbow (Distal)</b></p> <table border="1"> <tr><td>S53.11</td><td>Anterior subluxation</td></tr> <tr><td>S53.114</td><td>Anterior dislocation, right</td></tr> <tr><td>S53.115</td><td>Anterior dislocation, left</td></tr> <tr><td>S53.12</td><td>Posterior subluxation</td></tr> <tr><td>S53.124</td><td>Posterior dislocation, right</td></tr> <tr><td>S53.125</td><td>Posterior dislocation, left</td></tr> <tr><td>S53.13</td><td>Medial subluxation</td></tr> <tr><td>S53.134</td><td>Medial dislocation, right</td></tr> <tr><td>S53.135</td><td>Medial dislocation, left</td></tr> <tr><td>S53.14</td><td>Lateral subluxation</td></tr> <tr><td>S53.144</td><td>Lateral dislocation, right</td></tr> <tr><td>S53.145</td><td>Lateral dislocation, left</td></tr> </table>	M25.21	Flail joint	M24.12	Articular cartilage	S43.01	Anterior subluxation	S43.014	Anterior dislocation, right	S43.015	Anterior dislocation, left	S43.02	Posterior subluxation	S43.024	Posterior dislocation, 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# Join Us for Spring Break Meeting

Prepare for ICD-10 on Friday, then take the drama out of your trauma on Saturday at the 2015 Spring Break Meeting.



Our program coordinators, including WVAOE President David Proctor, MBA, ACT, and physicians from Beckley and Charleston, Brett Whitfield, MD, and the staff of the CAMC Trauma Group, are preparing a great slate of speakers for our 2015 Spring Break Meeting at Stonewall Jackson Resort in April.

In fact, we have two great days planned for members of the WV Association of Orthopaedic Executives, members of the WV Orthopaedic Society and guests.

Beginning on Friday, April 17, we will present a full day of ICD-10 training by the staff of Karen Zupko & Associates. This session is open to practice managers and staff, physicians and others who need to bill for orthopaedic procedures.

After the full-day session, we hope to take an hour-long boat ride on the lake; there will be a few golf tee times available that day, as well. After dinner with friends, you can join us for a reception with exhibitors and then a benefit Texas Hold `em tournament to raise funds for the Orthopaedic Research and Education

Foundation (OREF). Details will be coming soon.

Saturday's clinical program will focus on "taking the drama out of your trauma." Our roster of speakers will be highlighted by AAOS First Vice President Dr. David Teuscher.

If you are interested in giving a 15-minute talk on a trauma issue, please contact Dr. Brett Whitfield at 304.253.1077 or [bone\\_broke@yahoo.com](mailto:bone_broke@yahoo.com); **please contact him by January 15.**

We will also have the annual MU/WVU Resident Research presentations with audience-selected awards for best research. There will be time for interesting case presentations by the membership in the afternoon and our annual business meeting will be included in the day.

We will have industry representatives present so you can peruse their latest advancements.

Conference information will be sent electronically to all members of both WVAOE and WVOS, and will be online at [www.wvos.org](http://www.wvos.org) in late January.

Bring the family and join us for a great weekend of fun!

# Vote wisely Continued from page 1

as election time grows near. This year proved the rule, with both legislative branches in West Virginia now controlled by Republicans, and four of our five Members of Congress being Republicans.

Second, the majority of eligible voters will not participate in the voting process. This one I cannot explain. For a Presidential election, 55% to 65% of voting Americans will take the time to vote, whereas for a midterm election it can go as low as 39% to 42%. This election had the lowest turnout in 60 years in West Virginia, at 37.6% of registered voters. It boggles me, too. Perhaps voters are disenchanted in the power of their vote considering the gridlock that Congress finds itself in time after time with the exquisite ability to not accomplish anything meaningful.

Finally, there will probably be a runoff somewhere. I hope you used your vote wisely.

So what are we to make of all of this? This highly complicated process boils down to three very important things: voting, voting and voting. Please make your voice heard! Do your best to know the issues! Your cast vote endorses one specific candidate as

your preference to operate the government we have created. That includes so many things in your life that matter and some things that may not. If you are tired of gridlock, I hope you voted for a candidate that can reach across the aisle and work together to solve the numerous and growing problems that this country faces. Whatever criteria you used, I hope you voted for the person running for that office and not strictly along party lines. Although I am a staunch supporter of one political party, I make it a point to vote for the best candidate for the job, Democrat, Republican or Independent. You should focus your support for an ideal and a vehicle and not just for an "R," "D" or "I" on your ballot. I hope you used your vote wisely.

Remember, we have a government of, by and for the people, who participate! I hope you used your vote wisely!

Sincerely,  
David E. Ede, M.D.

Sincerely,  


David E. Ede, M.D.  
President, WVOS

Please study the  
issues...  
always...  
then cast your  
vote wisely,  
regardless of  
election.

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**Consider contributing to  
Ortho PAC  
to help make your voice heard on  
issues of importance to  
orthopaedic medicine and  
your patients!**

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David Ede, MD, President  
Diane Slaughter CAE, APR, Executive Director**

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