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* These guidelines are to be used only as a tool for initial reference and not be used as exclusive indicators for referral to Orthopaedics.

A. Flat Feet [ICD-9 Code: 754.61] [ICD-10 Code: Q66.*]

Pre-Referral Exam(s)	Pre-Referral Workup & Action Items	Further Workup & Action Items May Include:
<ul style="list-style-type: none"> Screening Exam for foot mobility <ol style="list-style-type: none"> Is arch present when standing tiptoe? Is some arch present when not weight bearing? Test for calf contracture - ankle dorsiflexion with knee extended $\geq 15^\circ$ 	<ul style="list-style-type: none"> If yes to 1, 2 or 3 Flexible No pain No calf contracture 	<ul style="list-style-type: none"> Counsel family. 90% do well w/o treatment. Orthotics/shoe inserts don't change final foot shape. No ortho referral needed. <p>Note: If feet become painful, over-the-counter supports, such as "superfeet" or similar products often help.</p>
<ul style="list-style-type: none"> Screening Exam for foot mobility (see 1,2,3 above) 	<ul style="list-style-type: none"> If yes to 1, 2 and no to 3 Flexible Pain with calf contracture 	<ul style="list-style-type: none"> Calf stretching exercises by parent or child if > 5 years old. No ortho referral needed.
<ul style="list-style-type: none"> Screening Exam for foot mobility (see 1,2,3 above) 	<ul style="list-style-type: none"> If no to 1, 2 Stiff 	<ol style="list-style-type: none"> Limited subtalar motion (cont. below) (usually 9-15 years old) Convex plantar surface (cont. below) (usually 6-12 months old)
<ol style="list-style-type: none"> Limited subtalar motion (usually 9-15 years old) 	<ul style="list-style-type: none"> Refer to Ortho 	<ul style="list-style-type: none"> Consider tarsal coalition Consider JRA
<ol style="list-style-type: none"> Convex plantar surface (usually 6-12 months old) 	<ul style="list-style-type: none"> Refer to Ortho 	<ul style="list-style-type: none"> Consider vertical or "oblique" talus

B. Intoeing [ICD-9 Code: 754.5*] [ICD-10 Code: Q66.0, Q66.1, Q66.2, Q66.3]

Pre-Referral Exam(s)

- Femoral anteversion
(Increased projection of the femoral neck on the femoral shaft - with the child prone, and the legs flexed, there will be an increased internal rotation, up to 90° and reduced external rotation)

- Internal tibial torsion
(Increased thigh-foot angle)

- Metatarsus adductus
(diagnosis made on the basis of a curved lateral border of the foot)

- In-toeing with pain or disability

Pre-Referral Workup & Action Items

- ▶ Counsel family
- ▶ May worsen prior to age 6 years
- ▶ Usually resolves between 6-12 years of age
- ▶ No ortho referral prior to age 6 years of age

- ▶ Counsel family
- ▶ Gradually resolves between 2-5 years of age
- ▶ No ortho referral prior to 6 years of age

- ▶ If flexible, no treatment needed
- ▶ If stiff, refer to Ortho
- ▶ No ortho referral prior to 6 months of age

- ▶ Refer to Ortho
- ▶ Document in detail the nature of the pain/disability

Further Workup & Action Items May Include:

- ▶ PT and orthotics have not been effective in improving the outcome or increasing rate of correction
- ▶ 80% resolve spontaneously

- ▶ Treatment with wedges, shoes, splints or orthotics has not proven effective
- ▶ Avoid sleeping in prone position or sitting on feet
- ▶ 90% resolve spontaneously

- ▶ 85-95% resolve before age 1 yr.

- ▶ None

C. Chronic Knee Pain [ICD-9 Code: 719.46] [ICD-10 Code: M25.561, M25.562]

Pre-Referral Exam(s)

- Knee pain 3 weeks or greater

- If positive hip exam (r/o SCFE)
(especially limited internal rotation)

- Negative hip exam
- Negative X-ray
- Continuing knee pain

- Negative MRI

- Positive MRI

Pre-Referral Workup & Action Items

- ▶ Obtain XR-4 View AP/Lateral, notch, merchant (skyline view of patella) views.
- ▶ Positive XR - refer to Ortho
- ▶ Negative XR - continue below

- ▶ Obtain XR-AP/Frog pelvis
- ▶ Positive XR - refer to Ortho
- ▶ Negative XR - continue below

- ▶ MRI knee - continue below

- ▶ Activity modification
- ▶ Home exercises - ongoing
- ▶ Physical therapy 6-12 weeks

- ▶ Refer to Ortho
- ▶ Send MRI report (*bring disc w/ images to visit*)
- ▶ Send relevant exam notes

Further Workup & Action Items May Include:

- ▶ X-ray: preferably at CHOC if insurance permits, as x-rays would be accessible to our specialists

- ▶ None

- ▶ None

- ▶ *If patient continues with knee pain and has failed PT, Ortho referral with documentation that the activity modification, exercises and PT are unsuccessful*

- ▶ None

D. Acute Knee Pain [ICD-9 Code: 719.4] [ICD-10 Code: M79.6*]

Pre-Referral Exam(s)

- Symptoms 3 weeks or less
- Recent injury, pain after cutting or pivoting, swelling, limping, locking

Pre-Referral Workup & Action Items

- ▶ Obtain XR-4 View AP/Lateral, notch, merchant (skyline view of patella) views.
- ▶ Refer to Ortho (with relevant notes, XR/MRI)
- ▶ Consider MRI as indicated by physical exam

Further Workup & Action Items May Include:

- ▶ X-ray: preferably at CHOC if insurance permits, as x-rays would be accessible to our specialists

E. Scoliosis [ICD-9 Code: 737.43] [ICD-10 Code: M41.4*, M41.5*]

Pre-Referral Exam(s)

- Angle of trunk rotation (ATR) < 5
- If ATR is 5 or greater
- Age 11 years - Adult: X-ray shows curve 20 degrees or greater
- Age 0 -10 years: X-ray shows curve 10 degrees or greater
- Age 11 years - Adult: X-ray shows curve less than 20 degrees
- Age 0 -10 years: X-ray shows curve less than 10 degrees

Pre-Referral Workup & Action Items

- ▶ No x-ray needed
- ▶ No Orthopedic surgeon referral needed
- ▶ Obtain x-ray - standing PA/lateral scoliosis on long films (36 inch)
- ▶ Refer to Ortho
- ▶ Patient to follow up with PCP in 6 months for an ATR check up. If ATR is increased, re-X-ray.

Further Workup & Action Items May Include:

- ▶ Patient to follow up with PCP every 6 months until 2 years post-menarche for females and age 16 for males
- ▶ X-ray: preferably at CHOC if insurance permits, as x-rays would be accessible to our specialists
- ▶ None
- ▶ X-ray: preferably at CHOC if insurance permits, as x-rays would be accessible to our specialists

F. CHOC X-ray Procedure

- Walk-in with RX from PCP, 1st floor, Bill Holmes Tower, CHOC Children's Hospital
- No appointment needed for standard X-rays
- Hours: Mon-Fri, 7 a.m. - 5:30 p.m.
- Verify w/ insurance company prior to appointment if authorization is needed
- If you have any insurance issues or related questions, please call CHOC admitting at 714-997-3000 x4111

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