

Upper Extremity Information Sheet

Upper Extremity Doctors - Wisconsin

Orthopedic Surgery – General (evaluates all body parts)

Balas, Mark MD* Barron, Stephen MD* Cederberg, Paul MD* Fideler, Bradley MD* Flesch, James MD* Gegenheimer Alan MD* Grossman, Thomas MD Jacker, Michael MD* Karr, Richard MD Klemme, William MD Krug, Alvin MD* Liebert, Paul MD

*Takes Personal Injury Cases

Meincke-Reza, Jeffrey MD* Noonan, J. Christopher MD* O'Brien, Ellen MD O'Brien, Thomas MD Reineck, Michael MD* Stiehl, James MD* Xenos, John MD

Orthopedic Surgery – Upper & Lower Extremity Only

Bartlett, David MD* (knee/shoulder/hip) Boyle, Austin MD* Mejia, Etienne MD Moe, Craig MD* (no hand/spine) Mologne, Timothy MD Saluja, Rajit MD Shivaram, Mysore MD Viehe, Thomas MD*(foot/ankle, knee/shoulder)

Orthopedic Surgery – Hand & Upper Extremity Only

Bax, John MD* Call, William MD* Cherney, Jon MD (IME only) Foley, James MD*(IME only) Gaenslen, Eric MD* Grindel, Steven MD* Siegert, John MD Toivonen, David MD (IME only)

Normal Range of Motion for Upper Extremities

Shoulder Flexion	0-180
Shoulder Extension	0-60
Shoulder Abduction	0-180
Shoulder Adduction	180-0
Shoulder External Rotation	0-70
Shoulder Internal Rotation	0-70
Shoulder Horizontal Abduction	0-45
Shoulder Horizontal Adduction	0-135
MCP Flexion	0-90

Elbow Flexion	0-135
Elbow Extension	135-0
Supination	0-90
Pronation	0-90
Wrist Flexion	0-80
Wrist Extension	0-70
Radial Deviation	0-20
Ulnar Deviation	0-30
MCP Extension	90-0

Wisconsin Worker's Compensation Permanent Partial Disability Ratings

<u>Shoulder</u> Ankylosis, optimum position,		Total loss inversion	5%
scapula free	55%	Total loss eversion	5%
In mal position	Grade upward	Complete Sensory Loss	
Limitation of active elevation in flexion and abduction to 45° but otherwise normal	30%	Any digit	50% Lesser involvement to be graded appropriately - 35% for
Limitation of active elevation in flexion and abduction to 90° but otherwise normal	20%		palmer, 15% for dorsal surface
Limitation of active elevation in flexion and abduction to 135°		Total median sensory loss to hand	65-75%
but otherwise normal	5%	Total ulnar sensory loss to hand	25%
Prosthesis	50%	Ulnar nerve paralysis	
<u>Elbow</u> Ankylosis, optimum position, 45°, angle		Above elbow, sensory involvement	50% at wrist
With radio-ulnar motion destroyed	60%	Below elbow, motor and sensory involvement	45-50% at wrist
With radio-ulnar motion intact Rotational ankylosis in	45%	Below elbow, motor involvement only	35-45% at wrist
neutral position	20%	Below elbow, sensory involvement only	5-10% at wrist
Any mal position Limitation of motion elbow joint,	Grade upward	Median nerve paralysis	
radio-ulnar motion unaffected		Above elbow, motor and sensory involvement	55-65% at wrist
Remaining range - 180° - 135° Remaining range -	35%	Thenar paralysis with sensory loss 40-50% at wrist	
135° - 90° Remaining range -	20%	Radial nerve paralysis	
180°- 90°	10%	Complete loss of extension, elbow wrist and fingers	45-55% at shoulder
Rotation at elbow joint Neutral to full pronation Neutral to full supination	10% 15%	Complete loss of extension, wrist and fingers	45-55% at wrist
<u>Wrist</u> Ankylosis, optimum position 30° dorsiflexion	30%	Peroneal nerve paralysis At level below knee	25-30% at kn
Mal position	Grade upward		
Total loss dorsiflexion	12 1/2%		
Total loss palmarflexion	7 1/2%		