## **Medical Treatment Guidelines**

## **Washington State Department of Labor and Industries**

## Review Criteria for Vascular Thoracic Outlet Syndrome Surgery<sup>1</sup> Surgery for vascular Thoracic Outlet Syndrome requires Utilization Review (UR).

The department's UR vendor will review requests for vascular TOS surgery in accordance with the review criteria listed below.

Type of TOS	Subjective	Objective	Imaging
Vascular TOS	At least <u>three</u> of the	At least <u>one</u> of the	C. Abnormal
arterial.	following must be present	following:	arteriogram.
	in the affected upper		
	extremity:	A. Pallor or coolness.	
		B. Gangrene of the	
	A. Pain.	digits in advanced	
	B. Swelling or heaviness.	cases.	
	C. Decreased temperature	4375	
	or change in color.	AND	
	D. Paresthesias in the ulnar		
	nerve distribution.		
	AND chicative enitonic		
We were less TOC	AND objective criteria	At least torre of the	D. Alexandra
Vascular TOS	At least <b>three</b> of the	At least <u>two</u> of the	D. Abnormal
venous.	following must be present	following:	venogram.
	in the affected upper	A Caralling of the come	
	extremity:	A. Swelling of the arm. B. Venous	
	A. Pain.		
	B. Swelling or heaviness.	engorgement. C. Cyanosis.	
	C. Decreased temperature	C. Cyanosis.	
		AND	
	or change in color. D. Paresthesias in the ulnar	AND	
	nerve distribution.		
	nerve distribution.		
	AND objective criteria		
	THIS OBJECTIVE CHITCHIA		

## **Notes**

- 1. The clinical findings in TOS may be similar to those in carpal tunnel syndrome, ulnar neuropathy or cervical radiculopathy. A physician should consider these alternative diagnoses before requesting TOS surgery.
- 2. Most patients with TOS have cervical ribs.
- 3. The Department of Labor and Industries has recently concluded a retrospective study of outcomes of thoracic outlet surgery on patients with Labor and Industries claims. The results indicate that long-term outcomes after TOS surgery are worse than outcomes with medical management of TOS.
- 4. The electromyographer should rule out neuropathic conditions that might mimic TOS, specifically cervical radiculopathy, carpal tunnel syndrome, ulnar neuropathy and polyneuropathy.

<sup>&</sup>lt;sup>1</sup> The neurogenic portion of the original 1995 guideline was removed October 2010 because neurogenic TOS surgery became its own separate guideline.