Coordination of care between a primary care physician and chiropractic resident for the management of meralgia paresthetica: A case report

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Coordination of Care between a Primary Care Physician and a Chiropractic Resident for the Management of Meralgia Paresthetica: A Case Report

Platform Presentation for ACC-RAC

March 25, 2023 – Braden Sims, DC
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Healthcare Collaboration

• Key Themes
  – Understanding roles and responsibilities (Brashers et al., Bridges et al.)
  – Coordinating Care (Davidson et al., Penney et al.)
  – Interprofessional Communication (Brashers et al., Davidson et al., Penney et al.)
Clinical Presentation

• Family Medicine Rotation
• Localized area of paresthesia on anterolateral aspect of left thigh
• Ipsilateral hip pain
History/Evaluation/Diagnosis

- Recent increase in time spent driving in his truck
- Worse with standing/walking
- BMI – 35
- No Motor Deficits
- Absent low back pain
- Absent centralization
- Tender and hypertonic hip musculature (left adductors, left quadriceps)
- Dx: Meralgia Paresthetica

![Diagram of the lower back and hip musculature, indicating the affected area and nerve compression.](Image)
Treatment/Outcomes

- **Patient Education**
  - Reassurance, favorable natural history

- **Manual Therapy**
  - Post-isometric relaxation, Two-person myofascial release technique

- **Behavioral Modification Strategies**
  - Minimize compression

- Pre-Treatment: 4/10 on a numeric pain scale for both paresthesia and pain
- 7 visits over 8 weeks
- Post-Treatment: pain resolved after first treatment; paresthesia progressively improved following each subsequent visit to full resolution
Coordination of Care

• Understanding roles and responsibilities
  – Observational rotation(s)

• Coordinating Care
  – Referral – Service to Chiropractic

• Interprofessional Communication
  – Via in-person and electronic medical record

• Effective Collaborative Management of MP
Aurora Integrated Clinical Practice
Chiropractic Residency Program
References


