DART – Diagnosis and Related Treatments

The DART Tool allows a user to obtain Treatment recommendations based on the disorder/condition. These recommendations are provided by ACOEM (American College of Occupational and Environmental Medicine), the gold standard for effective treatment of occupational injuries and illnesses.

To learn more about the methodology of ACOEM and the DART tool, please visit this webpage:

https://new.mdguidelines.com/dart/help

Where Is DART Located?

1. You can access the tool from the MDGuidelines homepage after you’ve successfully logged-in:

2. The tool is also located within topics that are covered by ACOEM (i.e. Carpal Tunnel Syndrome) at the end of the Diagnosis and Treatment Sections:
3. The tool is also located within the Tools section next to the name of the user:

How Do I Use The Tool?

1. After you click on the tool the user can begin to look up treatment recommendations. If you click on the link while you are within a topic it will populate the disorder in the “Topic” field:
2. Once you have selected a topic (full list at the end of the document), you can choose a category of treatment, or choose “any” to view all treatment types:

3. Next you can choose the specific phase of injury, or select “All”. Here are the definitions for the different phases:

   Acute: Less than 2 weeks
   Subacute: Between 2 and 6 weeks
   Chronic: More than 6 weeks
   Surgical: Surgical considerations only
4. Once you have your selections you click Go!

<table>
<thead>
<tr>
<th>Treatment Name</th>
<th>Recommendation</th>
<th>Strength of Evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carpal Tunnel Injections</td>
<td>Recommended</td>
<td>Strongly Recommended, Evidence (A)</td>
</tr>
<tr>
<td>Surgical Release</td>
<td>Recommended</td>
<td>Strongly Recommended, Evidence (A)</td>
</tr>
<tr>
<td>Glucocorticosteroids, Oral</td>
<td>Recommended</td>
<td>Moderately Recommended, Evidence (B)</td>
</tr>
<tr>
<td>NSAIDs</td>
<td>Recommended</td>
<td>Moderately Recommended, Evidence (B)</td>
</tr>
<tr>
<td>NSAIDs During Post-operative Rehabilitation</td>
<td>Recommended</td>
<td>Moderately Recommended, Evidence (B)</td>
</tr>
<tr>
<td>Open or Endoscopic Release</td>
<td>Recommended</td>
<td>Moderately Recommended, Evidence (B)</td>
</tr>
<tr>
<td>Wrist Splinting, Nocturnal</td>
<td>Recommended</td>
<td>Moderately Recommended, Evidence (B)</td>
</tr>
<tr>
<td>Acetaminophen</td>
<td>Recommended</td>
<td>Recommended, Evidence (C)</td>
</tr>
<tr>
<td>Cryotherapy During Post-operative Rehabilitation</td>
<td>Recommended</td>
<td>Recommended, Evidence (C)</td>
</tr>
<tr>
<td>Electrodiagnostic Studies, for Diagnosis</td>
<td>Recommended</td>
<td>Recommended, Evidence (C)</td>
</tr>
</tbody>
</table>
**How Do I Utilize The Information?**

The DART tool will retrieve treatment recommendations according to your parameters. If you choose all for Category and Phase it will show all results. The information summarized by 3 columns: Treatment name, Recommendation, and Strength of Evidence.

1. By default, the results are sorted by Recommendation (Recommended, Not Recommended, and No Recommendation). You can choose to re-sort the results by any of the three columns, ascending or descending by clicking on the dash or carret above each column heading.
2. Treatment name – You can filter by keyword within this column (i.e. opioids if you chose “All” or “Medications” for Category:

![DART - Diagnosis and Related Treatments](image)

3. Recommendation – There are 4 types of recommendations and they can be filtered by the following options:
   a. Recommended
      i. Evidence exists to support the use of this type of treatment
      ii. Includes “Sometimes Recommended” – the user should review the detailed evidence to make a decision.
   b. Not Recommended
      i. Evidence exists against the use of this type of treatment
   c. No Recommendation
      i. Not enough evidence exists either for or against the use of this treatment type
4. **Strength of Evidence** – Please review the following webpage to see the definitions for evidence strength: [https://new.mdguidelines.com/dart/help](https://new.mdguidelines.com/dart/help).

You can also view this help directly from within the tool:

![DART - Diagnosis and Related Treatments](image)

**How Do I View The Full Recommendations?**

1. Click anywhere along the recommendation row or click the + on the left side. This will expand the row to show the full recommendation:

   ![Recommended](image)

   - **Acetaminophen**
   - **Recommended**
   - **Recommendation Summary:** Acetaminophen is recommended for post-operative management of CTS-related pain.
   - **Indication:** Patients having recently undergone carpal tunnel surgical release. Generally treat 2 weeks up to 6 weeks post-op unless complications occur.
   - **Frequency/Dose/Duration:** See manufacturer’s recommendations.
   - **Rationale:** There is one high-quality study in post-operative patients indicating that for post-operative pain management, naproxen is superior to acetaminophen, which in turn is superior to placebo (384). NSAIDs and acetaminophen may also facilitate the rehabil - More...
   - **Evidence Summary:** There is 1 high-quality and 4 moderate-quality RCTs incorporated into this analysis.
     - See Evidence Table
   - **Comments:** Indications for Discontinuation: Resolution of pain, adverse effects, intolerance.

2. Once expanded you will be able to see the full recommendation, indications*, frequency and dose*, rationale*, evidence summary*, and comments*.
   a. * if applicable
3. If you would like to print or copy the recommendation click on the “print” Icon on the right-hand side of the recommendation:

- Acetaminophen
  - Recommendation Summary: Acetaminophen is recommended for post-operative management of CTS-related pain.
  - Indication: Patients having recently undergone carpal tunnel surgical release. Generally treat 2 weeks up to 6 weeks post-op unless complications occur.
  - Frequency/Dose/Duration: See manufacturer’s recommendations.
  - Rationale: There is one high-quality study in post-operative patients indicating that for post-operative pain management, naproxen is superior to acetaminophen, which in turn is superior to placebo (384). NSAIDs and acetaminophen may also facilitate the rehabil - More...
  - Evidence Summary: There is 1 high-quality and 4 moderate-quality RCTs incorporated into this analysis.
  - Comments: Indications for Discontinuation: Resolution of pain, adverse effects, intolerance.

This will open a new browser page with full details. Use your browser Print function to print the page. You may also select and copy any text and paste it into another application.
**Topics With ACOEM Content?**
*(as of October 31, 2015)*

**Ankle and Foot**
- Achilles Bursitis or Tendinitis
- Fracture, Ankle
- Fracture, Calcaneus
- Fracture, Forefoot (Sesamoid, Phalanges)
- Fracture, Metatarsal Bones
- Fracture, Midfoot (Cuboid, Cuneiform, Navicular)
- Fracture, Talus
- Fracture, Tibia or Fibula
- Plantar Fasciitis
- Sprains and Strains, Ankle
- Tarsal Tunnel Syndrome

**Cervical and Thoracic Spine**
- Cervical Disc Disorder with Myelopathy
- Fracture, Cervical Spine (Without Spinal Cord Injury)
- Headache
- Myelopathy
- Neck Pain
- Spinal Stenosis
- Spondylolysis
- Sprains and Strains, Cervical Spine (Neck)
- Thoracic Spine Pain

**Chronic Pain**
- Complex Regional Pain Syndrome
- Fibromyalgia
- Pain, Chronic
- Peripheral Neuropathy

**Elbow**
- Bicep Tendinitis
- Contusion, Upper Limb
- Epicondylitis, Medial and Lateral
- Fracture, Humerus, Distal
- Fracture, Radius, Proximal
- Neuropathy of Ulnar Nerve (Entrapment)
- Pronator Syndrome
- Sprains and Strains, Elbow

**Eye**
- Blepharitis
- Conjunctivitis
- Corneal Abrasion
- Corneal Ulcer
- Foreign Body, Cornea
- Stye
- Visual Fatigue

**Hand, Wrist, and Forearm**
- Carpal Tunnel Syndrome
- Compartment Syndrome
- Crush Injury
- Dupuytren’s Contracture
- Fracture, Carpal Bones
- Fracture, Fingers and Thumb
- Fracture, Metacarpal Bones
- Fracture, Radius and Ulna, Distal
- Neuropathy of Radial Nerve (Entrapment)
- Neuropathy of Ulnar Nerve (Entrapment)
- Pain in Limb
- Puncture Wounds
- Sprains and Strains, Hand or Fingers
- Sprains and Strains, Wrist
- Synovial Cyst
- Tenosynovitis
- Tenosynovitis, Radial Styloid
- Triangular Fibrocartilage Complex (TFCC) Tears
- Trigger Finger or Thumb

**Hip and Groin**
- Epididymitis
- Femoral Acetabular Impingement
- Fracture, Femoral Neck
- Gluteus Medius Tear
- Groin Strain
- Hip Dysplasia
- Ligamentum Teres Rupture
- Meralgia Paresthetica
- Orchitis
- Trochanteric Bursitis
### Knee
- Dislocation, Patella (Kneecap)
- Fracture, Patella
- Meniscus Disorders, Knee
- Sprains and Strains, Knee

### Low Back
- Ankylosing Spondylitis
- Fracture, Lumbosacral Spine (Without Spinal Cord Injury)
- Low Back Pain
- Sciatica
- Spinal Stenosis
- Spondylolisthesis
- Spondylolysis, Lumbar Region

### Pulmonary
- Asbestosis
- Asthma
- Occupational Asthma
- Pneumoconiosis
- Silicosis

### Shoulder
- Adhesive Capsulitis of Shoulder
- Dislocation, Glenohumeral
- Fracture, Clavicle
- Fracture, Humerus, Proximal
- Impingement Syndrome
- Myofascial Pain Syndrome
- Rotator Cuff Syndrome
- Rotator Cuff Tear
- Sprains and Strains, Shoulder and Upper Arm
- Thoracic Outlet Syndrome

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**Need Additional Support?**

Please call 800.442.4519 or email guidelines@reedgroup.com if you have additional questions or concerns.