

# Medical Practice Questions

**EDITOR'S NOTE:** From time to time medical practice questions of general interest are referred to the Scientific Board by the Quality Care Review Commission of the California Medical Association. Each is sent to members of the appropriate Scientific Advisory Panel.\* Their responses are collated, reviewed and then submitted to the Quality Care Review Commission as the Scientific Board's opinion on the scientific and practice aspects of the question. The Commission adds suggestions to assist peer review units and authorizes publication.

These opinions and positions are informational only and are not intended to be used as instructions, directives or policy statements. The appropriateness of care in individual cases should not be determined by these answers, but should be reviewed by local peer review committees.

Questions and reprint requests may be submitted to the Medical Practice Questions Committee, Quality Care Review Commission, California Medical Association, 731 Market Street, San Francisco, CA 94103.

## Arthroscope Procedures

### QUESTION:

*Is it accepted medical practice to use an assistant surgeon for surgical procedures performed with an arthroscope?*

### OPINION:

It is the opinion of the Advisory Panel on Orthopedics that it is frequently necessary to have an assistant surgeon, particularly if an arthrotomy may be necessary.

The CMA Quality Care Review Commission comments further that "the use of assistant surgeons should not be considered a routine component of every arthroscope procedure."

## Hyperbaric Oxygen Therapy

### QUESTION:

*What are the conditions for which hyperbaric oxygen therapy is considered acceptable medical treatment?*

### OPINION:

It is the opinion of the Advisory Panels on General Surgery, Dermatology, Occupational Medicine, Physical Medicine and Rehabilitation, Internal Medicine and Orthopedics that clearly proved uses for hyperbaric oxygen therapy are as follows:

- carbon monoxide poisoning,
- decompression sickness (the bends),
- gas embolism,
- gas gangrene due to *Clostridium perfringens*
- osteoradionecrosis,

\*The Scientific Board of the California Medical Association has a Scientific Advisory Panel for each of 24 recognized specialties of medical practice. Each Advisory Panel includes representation from the appropriate department of each of the eight medical schools in California, representatives of specialty societies in the field and representatives from the Specialty Sections of the Association. The Advisory Panels are thus broadly and authoritatively based in both academia and practice.

- refractory osteomyelitis,
- cerebral edema,
- crush injury,
- Meleney's ulcer,
- compromised skin grafts,
- reimplantation of severed limbs,
- acute peripheral arterial insufficiency,
- acute traumatic peripheral ischemia,
- *Bacteroides* infections,
- central retinal artery insufficiency.

## Stat-Tek Glucose Analyzer for Diabetes

### QUESTION:

*Is intermittent self-monitoring of blood glucose using the Stat-Tek glucose analyzer an acceptable practice for diabetes?*

## Dextrometer for Self-testing of Blood Glucose

### QUESTION:

*Is the use of—and purchase of—a Dextrometer for self-testing of blood glucose accepted medical practice for all diabetics, or should it be limited to certain patients and, if so, which ones?*

### OPINION:

It is the opinion of the Advisory Panels on General and Family Practice, Internal Medicine, Pathology and Pediatrics that home self-monitoring of blood glucose by diabetics can be an effective and acceptable means of stabilizing control of some patients having insulin-dependent diabetes, including pregnant diabetics and others for whom strict control should be achieved. Among the factors to be considered are (1) the motivation and reliability of the patient, (2) the need for periodic quality control checks and (3) cost of various home monitoring systems.