

Support Services for Work-Related Trauma Disabilities

Summary

This article outlines the spectrum of supports needed for workers whose disability originates from a sudden workplace accident (for example, a fall from stairs). Such incidents often cause multiple hidden injuries to the body and brain—including joint injuries in the hands, wrists, and shoulders, rib contusions, soft-tissue damage, ligament/tendon tears, and post-concussion complications—that are not always detected by X-ray.

Families quickly become overwhelmed, and **Workers' Compensation (WC)** advocates play a crucial role in records management, filing, and communication, so that medical care and benefits are not delayed. The taxonomy of services extends from acute care through rehabilitation, psychosocial supports, workplace accommodations, and return-to-work.

Highlights

- Acute Care: Hospitals usually perform X-rays but often discharge patients
 without MRI or advanced imaging. If pain, swelling, instability, or chest discomfort
 persists, further imaging is essential to detect hidden joint injuries, rib
 contusions, and soft-tissue damage.
- Rehabilitation: Physical, occupational, and vestibular-balance therapies support recovery. MRI findings enable targeted programs for hands, wrists, shoulders, ribs, and other injured parts. Post-concussion effects can be deep and longlasting, requiring specialized treatment (balance retraining, cognitive pacing, and psychological support).
- Psychosocial Support: Counseling, peer groups, and family education reduce stress and isolation.
- Workplace Supports: Vocational rehabilitation, ergonomic adjustments, and phased return-to-work ensure safe reintegration.

- Assistive Technology: Braces/orthoses for joints in the hands, wrists, and shoulders, ergonomic tools, cushions for rib injuries, and software to compensate for physical or cognitive limitations.
- **Legal & Administrative:** WC advocates manage records, track deadlines, and secure wage replacement and medical coverage.
- Long-Term Integration: Monitoring for post-traumatic arthritis in joints, ribrelated complications, and prolonged concussion symptoms; wellness programs and retraining opportunities.

Advocacy & Best Practices

- Advocacy & Records: WC advocates protect injured workers by organizing medical reports, confirming filings, and coordinating with insurers and employers.
- Common Pitfalls: Missed MRIs, overlooked rib contusions, underestimated post-concussion effects, delayed reporting, incomplete forms, missed deadlines, or retaliation can block benefits and treatment.
- Best Practices: Document symptoms daily, request MRI or additional imaging if pain persists (especially in hands, wrists, shoulders, or ribs), insist on specialized post-concussion treatment, confirm all filings, and engage advocates early in complex or disputed cases.

Key Message

Support after work-related trauma is not only about medical treatment but also about timely diagnosis, accurate records management, and coordinated rehabilitation. With proper advocacy, families avoid unnecessary stress, employers remain compliant, and insurers reduce disputes. Advocacy also prevents mistakes that often arise from miscommunication between employers, insurance companies, healthcare providers, families, and other stakeholders. Most importantly, workers receive the targeted treatment and accommodations they need to return safely to work and community life.

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