

**DRAFT**  
**Oregon Workers' Compensation Division**  
**Medical Advisory Committee Updated Recommendation**  
**Regarding Platelet Rich Plasma (PRP) Injections**

October 18, 2024

**Summary:**

The Medical Advisory Committee of the Workers' Compensation Division researched and analyzed whether Platelet Rich Plasma Injections should be a compensable medical service.

After conducting a thorough literature review and determining the most persuasive studies, the committee concluded that Platelet Rich Plasma Injections should be a **compensable** medical service for:

- Knee: Osteoarthritis pain, chondral surface injury and non-operative partial thickness meniscal tears after failure of 3 months of conservative care, which may include a standard course of physical therapy.
- Elbow: Lateral and medial epicondylitis after 3 months of conservative care, which may include a standard course of physical therapy, proves unsuccessful.
- Shoulder: Shoulder, tendon, bursa, and muscle injuries, including non-operative partial tears and small tears, and adhesive capsulitis after failure of 3 months of conservative care, which may include a standard course of physical therapy.

**Finding:**

Platelet Rich Plasma Injections should be **compensable**, under certain circumstances because the procedure is:

- |                    |                                                                |
|--------------------|----------------------------------------------------------------|
| • Scientific       | - studies reviewed employed the scientific method              |
| • Not outmoded     | - is within the current standard of care                       |
| • Proven           | - the evidence demonstrates efficacy in studies                |
| • Not experimental | - there is sufficient evidence in studies to reasonably assess |

**Recommendation:**

- Platelet Rich Plasma Injections should **not** be a **compensable** medical service **unless** they are for:
  - Knee: Osteoarthritis pain, chondral surface injury and non-operative partial thickness meniscal tears after failure of 3 months of conservative care, which may include a standard course of physical therapy.
  - Elbow: Lateral and medial epicondylitis after 3 months of conservative care, which may include a standard course of physical therapy, proves unsuccessful.
  - Shoulder: Tendon, bursa, and muscle injuries, including non-operative partial tears and small tears, and adhesive capsulitis after failure of 3 months of conservative care, which may include a standard course of physical therapy.