

*Berkshire West Clinical Commissioning Group
Buckinghamshire Clinical Commissioning Group
East Berkshire Clinical Commissioning Group
Oxfordshire Clinical Commissioning Group*

Thames Valley Priorities Committee Commissioning Policy Statement

Policy No. 172d (TVPC19) Carpal Tunnel Syndrome

Recommendation made by the Priorities Committee: **May 2015, reviewed July 2018, updated October 2020¹**

Date agreed by OCCG: **September 2015, September 2018, December 2020**

Date of issue **September 2015, minor update September 2018, December 2020**

Carpal Tunnel Release will be funded in line with the NHS England (2018; updated 2019) Evidence Based Interventions Statutory Guidance:

Mild cases of Carpal Tunnel Syndrome with intermittent symptoms causing little or no interference with sleep or activities require no treatment. Cases with intermittent symptoms which interfere with activities or sleep should first be treated corticosteroid injection(s), night splints or physiotherapy.

Surgical treatment of carpal tunnel syndrome will be considered if one of the following criteria is met:

- The symptoms significantly interfere with daily activities and sleep symptoms and have not settled to a manageable level with either one local corticosteroid injection and/or nocturnal splinting for a minimum of 8 weeks;

OR

- There is either:
 - a permanent (ever-present) reduction in sensation in the median nerve distribution;
- OR**
- muscle wasting or weakness of thenar abduction (moving the thumb away from the hand).

Routine nerve conduction studies are not normally necessary in primary or intermediate care.

¹ Updated to reflect NHS England Evidence-Based Intervention Statutory Guidance
<https://www.england.nhs.uk/evidence-based-interventions/ebi-programme-guidance/>

ICD10 Diagnosis Codes

G56.0 Carpal Tunnel Syndrome

OPCS Procedure Codes

A65.1 Carpal Tunnel Release

A69.2 Revision of carpal tunnel release

NOTES:

- Potentially exceptional circumstances may be considered by a patient's CCG where there is evidence of significant health status impairment (e.g. inability to perform activities of daily living) and there is evidence that the intervention sought would improve the individual's health status.
- This policy will be reviewed in the light of new evidence or new national guidance, e.g., from NICE.
- Thames Valley clinical policies can be viewed at <http://www.fundingrequests.ccsu.nhs.uk/>
- Oxfordshire CCG clinical policies can be viewed at <http://www.oxfordshireccg.nhs.uk/professional-resources/policies>