

August 17, 2007

DATE OF REVIEW: 08/16/07

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Sixteen total session of physical therapy (97110, 97140, 97032) three times weekly for four weeks, then two times weekly for two weeks.

DESCRIPTION OF QUALIFICATIONS OF REVIEWER:

D.C., Diplomate of Congress of Chiropractic Consultants, 22 years of active chiropractic practice, Texas Department of Insurance Division of Workers' Compensation Designated Doctor Approved Doctor's list, Impairment Rating and Maximum Medical Improvement Certified through Texas Department of Insurance Division of Workers' Compensation

REVIEW OUTCOME:

Upon independent review, I find that the previous adverse determination or determinations should be (check only one):

Upheld (Agree)

Overturned (Disagree)

Partially Overturned (Agree in part/Disagree in part)

The requested sixteen sessions of physical therapy is not medically necessary for the treatment of this patient's on-the-job injury.

INFORMATION PROVIDED FOR REVIEW:

1. TDI case assignment
2. Letters of denial & UR notes.
3. Radiology: Cervical myelography/CT 06/15/06 & Lumbar myelography/CT 08/17/06
4. Electrodiagnostic study 06/15/07
5. Musculoskeletal exams 11/29/06, 01/31/07 & 06/28/07
6. Chiropractic office exam notes 07/02/07 & 07/16/07

SUMMARY OF INJURED EMPLOYEE CLINICAL HISTORY:

The records indicate the claimant is a male who reported neck pain on xx/xx/xx after suffering an injury while on his job.

Records indicate the claimant underwent surgical fusion with additional surgery to correct the pseudoarthrosis performed on 09/18/06. The claimant has received 36 sessions of postoperative physical therapy. Functional Capacity Evaluation dated 05/22/07 noted maximum lifting ability between ten and fifteen pounds, despite the patient receiving extensive therapy of 36 visits.

He was given a 15% or 16% impairment rating and placed at maximum medical improvement by TDI/DWC appointed Designated Doctor. According to the records, the patient has received sufficient post-operative rehabilitation to include up to 36 sessions, which exceeds the normal ODG Guidelines for this type of surgical intervention. There is a mention in the notes that the patient needs this additional therapy because of deconditioning as well as the fact that he has had no therapy since February 2007. In addition, in the request from the treating doctor's office, he states that if these sixteen visits were approved, then at that time the patient would be educated in home exercise program.

ANALYSIS AND EXPLANATION OF THE DECISION, INCLUDING CLINICAL BASIS, FINDINGS AND CONCLUSIONS USED TO SUPPORT DECISION:

This patient should have already been thoroughly educated in a home exercise program after receiving 36 post-operative therapy sessions. In addition, it is unclear why the patient has not returned to his employment in conjunction with utilizing an aggressive home exercise program. In conclusion, the patient has received sufficient therapy in the past to recover from his on-the-job injury.

DESCRIPTION AND SOURCE OF THE SCREENING CRITERIA OR OTHER CLINICAL BASIS USED AND/OR CONSIDERED IN MAKING THIS DECISION:

- ACOEM-American College of Occupational & Environmental Medicine UM Knowledgebase.
 - AHCPR-Agency for Healthcare Research & Quality Guidelines.
 - DWC-Division of Workers' Compensation Policies or Guidelines.
 - European Guidelines for Management of Chronic Low Back Pain.
 - Interqual Criteria.
 - Medical judgement, clinical experience and expertise in accordance with accepted chiropractic standards.
 - Mercy Center Consensus Conference Guidelines.
 - Milliman Care Guidelines.
 - ODG-Official Disability Guidelines & Treatment Guidelines.
 - Pressley Reed, The Medical Disability Advisor.
 - Texas Guidelines for Chiropractic Quality Assurance & Practice Parameters.
 - Texas TACADA Guidelines.
 - TMF Screening Criteria Manual.
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- _____ Peer reviewed national accepted medical literature (provide a description).
 - _____ Other evidence-based, scientifically valid, outcome-focused guidelines (provide a description.)
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