

REVIEWER'S REPORT

DATE OF REVIEW: 12/14/07

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Durable medical equipment, miscellaneous, specifically a firm mattress described as Comfort 9000 King Set Dual Plot Wired Mattress and Culder Spa with Complete Hydrotherapy Package.

DESCRIPTION OF QUALIFICATIONS OF REVIEWER:

M.D., Board Certification by the American Board of Orthopedic Surgery, with experience in the evaluation and treatment of patients with chronic low back pain.

REVIEW OUTCOME:

Upon independent review, I find that the previous adverse determination or determinations should be:

- Upheld (Agree)
- Overturned (Disagree)
- Partially Overturned (Agree in part/Disagree in part)

INFORMATION PROVIDED FOR REVIEW:

1. TDI Case Assignment
2. URI Letters of Denial and criteria utilized in the denial- ODG
3. Neurosurgeon's operative report for lumbar myelogram dated 10/12/07
4. Prescription for the mattress and spa dated 10/31/07 and correspondence dated 09/24/07 and 10/18/07
5. Radiology reports dated 09/19/07 and 10/12/07
6. Pain specialist office notes dated 05/10/07 through 08/23/07 (4 visits)

INJURED EMPLOYEE CLINICAL HISTORY (Summary):

This male with a several-year history of back pain has undergone two surgical procedures from L4 to the sacrum. Current imaging studies suggest stenosis and spondylolisthesis at L3/L4. Specific mattress recently prescribed was denied, appealed, and subsequently denied.

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

There is a general consensus without any specific evidence-based evaluation in the literature that sleeping on a firm mattress provides not only comfort at night but also less low back pain upon arising. There is no specific proof of this consensus. As a matter of fact, there is a recent study from Spain involving the Kovacs Spine Foundation, which suggested that a patient's sleeping on a medium-firm mattress were more likely to report relief of symptoms of chronic low back pain than those sleeping on other mattress surfaces. This consensus relates to patients with chronic

low back pain of a mechanical or myofascial nature. It does not relate to patients with specific structural abnormalities.

This patient suffers the post-operative symptom of recurring low back pain symptoms. In accordance with ODG & Treatment Guidelines, Low Back Chapter, page 1027, it does not appear that the purchase of this mattress should be considered as durable medical equipment for the treatment of this patient's back pain with structural abnormality.

DESCRIPTION AND SOURCE OF THE SCREENING CRITERIA OR OTHER CLINICAL BASIS USED TO MAKE YOUR 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 judgment, clinical experience and expertise in accordance with accepted medical standards.
- Mercy Center Consensus Conference Guidelines.
- Milliman Care Guidelines.
- ODG-Official Disability Guidelines & Treatment Guidelines, **Low Back Chapter, Page 1027.**
- Pressley Reed, The Medical Disability Advisor.
- Texas Guidelines for Chiropractic Quality Assurance & Practice Parameters.
- Texas TACADA Guidelines.
- TMF Screening Criteria Manual.
- Peer reviewed national accepted medical literature (provide a description).
- Other evidence-based, scientifically valid, outcome-focused guidelines (provide a description.)