Advanced Medical Reviews

ACCREDITED EXTERNAL REVIEW

Notice of Independent Review Decision

PEER REVIEWER FINAL REPORT

DATE OF REVIEW: 12/7/2007
IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

1. Ten additional sessions of work hardening

QUALIFICATIONS OF THE REVIEWER:

This reviewer graduated from the University of Oklahoma Medical School in 1975. His board certification is in Family Medicine. He has licenses in Oklahoma and Texas and has worked in private practice for over 20 years.

REVIEW OUTCOME:

Upon independent review the reviewer finds that the previous adverse determination/adverse determinations should be:

X Upheld (Agree)

Overturned (Disagree)

Partially Overturned (Agree in part/Disagree in part)

1. Ten additional sessions of work hardening Upheld

INFORMATION PROVIDED TO THE IRO FOR REVIEW

1. IRO request form dated 11/20/2007
2. Request for a review dated 11/19/2007
3. Clinical note dated 11/8/2007
4. Clinical note by CI, dated 11/19/2007
5. Notice to air dated 11/26/2007
6. Review organization dated 11/26/2007
7. Clinical note dated 11/8/2007 and 11/19/2007
8. Clinical note dated 11/5/2007 to 11/19/2007 multiple dates
9. Clinical note dated 10/30/2007
10. Treatment evaluation request dated 11/1/2007
11. Clinical note dated 10/19/2007
12. Clinical note dated 10/18/2007
13. Capacity evaluation dated 10/25/2007
14. Therapy order sheet dated 10/19/2007
15. Clinical history note dated 10/19/2007
16. Therapy order sheet dated 9/24/2007
17. Clinical history note dated 9/27/2007
18. Status report dated 10/8/2007
19. Therapy order sheet dated 8/21/2007
20. Clinical history note dated 8/21/2007
21. Status report dated 9/5/2007
22. Therapy order sheet dated 8/8/2007
23. Clinical history note dated 8/8/2007
24. Status report dated 8/22/2007
25. Weekly progress report dated 9/25/2007
26. Psychotherapy session note by M.Ed, dated 9/25/2007
27. Daily progress notes dated 9/25/2007

28. Clinical note dated 9/25/2007
29. Weekly progress report dated 9/18/2007
30. Psychotherapy session note by M.Ed, dated 9/18/2007
31. Daily progress note dated 9/18/2007
32. Clinical note dated 8/23/2007
33. Clinical note dated 5/3/2007 to 6/12/2007 multiple dates
34. Clinical note by MD, dated 4/12/2007
35. Imaging report by MD, dated 3/29/2007
36. Operative report by MD, dated 6/15/2007
37. Imaging report by MD, dated 4/20/2007
38. Imaging report by MD, dated 4/13/2007
39. Imaging report by MD, dated 4/20/2007
40. Confidential note by MD, dated 8/28/2007
41. Clinical note dated 11/13/2007
42. Treatment evaluation request dated 11/13/2007
43. Clinical note dated 11/8/2007
44. Clinical note dated 11/12/2007
45. Notice to utilization dated 11/26/2007
46. Clinical note dated 11/8/2007
47. Clinical note dated 11/19/2007
48. Appeal denial letter dated 11/19/2007
49. Clinical note dated 11/14/2007
50. Pre authorization request dated 11/13/2007
51. Preauth notification dated 11/8/2007
52. Denial letter dated 11/8/2007
53. Clinical note dated 11/5/2007 to 11/8/2007, multiple dates
54. Clinical note dated 11/5/2007
55. Evaluation request dated 11/1/2007
56. Clinical note dated 10/19/2007
57. Clinical note dated 10/18/2007
58. Capacity evaluation dated 10/25/2007
59. Order sheet dated 10/19/2007
60. Clinical health history dated 10/19/2007
61. Order sheet dated 9/24/2007
62. Continuation of clinical history dated 9/27/2007
63. Work status report dated 9/27/2007
64. Order sheet dated 8/21/2007
65. Clinical history dated 8/21/2007
66. Works status report dated 9/5/2007
67. Order sheet dated 8/8/2007
68. Clinical history dated 8/8/2007
69. Works status report dated 8/8/2007
70. Professional physical therapy dated 9/25/2007
71. Psychotherapy session by PhD, dated 9/25/2007
72. Daily progress notes dated 9/25/2007
73. Clinical note dated 9/25/2007
74. Weekly progress report by PT, dated 9/18/2007
75. Psychotherapy session by PhD, dated 9/18/2007
76. Daily progress note dated 9/18/2007
77. Clinical note dated 8/23/2007
78. Clinical note dated 5/3/2007 to 6/12/2007, multiple dates
79. Clinical note by MD, dated 4/12/2007
80. Imaging report by MD, dated 3/29/2007
81. Operative report by MD, dated 6/15/2007
82. Imaging report by MD, dated 4/13/2007 to 4/20/2007, multiple dates
83. Report of clinical interview by MD, dated 8/28/2007
84. Clinical note dated 11/13/2007
85. Evaluation request dated 11/13/2007
86. Clinical note dated 11/8/2007
87. Clinical note by MD, dated 11/12/2007
88. The ODG Guidelines were not provided

INJURED EMPLOYEE CLINICAL HISTORY [SUMMARY]:

This injured employee is a male who is status- post arthroscopy of the left knee and a fracture of the left calcaneus per MRI. The injured employee has completed 4 weeks of work hardening and showed improvement. The injured employee was lifting 55 pounds and needs to reach a lifting capacity of 75 pounds. The services being disputed are 10 additional sessions of work hardening.

ANALYSIS AND EXPLANATION OF THE DECISION INCLUDE CLINICAL BASIS, FINDINGS AND CONCLUSIONS USED TO SUPPORT THE DECISION.

This employee is a male with a history of falling off of a ladder at work and landing on his left foot. He was initially unable to bear weight, missed a day of work, did restricted work for a few days, and eventually reported for a medical evaluation on 3/12/2007. After x-rays and MRIs, the injured worker was referred to an orthopedic consultant and had his ankle casted for two weeks. He started his physical rehabilitation on 3/12/2007. The injured worker underwent a diagnostic arthroscopy on 6/12/2007 and had post-op therapy from 6/27/2007 to 8/17/2007. The above history was documented as part of an FCE on 9/4/2007. The diagnosis at that time was acute synovitis, tear of the lateral and medial meniscus, partial tear of the ACL, fracture of the left calcaneus, high grade partial thickness tear of the common flexor tendon, and medial epicondylitis. This chart consisted of multiple therapy notes, multiple work status reports, and several provider notes. There was a provider note dated 9/27/2007 indicating that the he had completed two weeks of work hardening. There was a provider note dated 10/8/2007 which stated the injured worker had completed two weeks of work hardening, and listed the deficits. A 10/19/2007 provider note indicated a request for a repeat FCE. There was a handwritten provider note dated 11/26/2007 stating that the patient still has deficits in floor to shoulder lifting of 50%. His job requires 76 lbs of lifting. He was still having pain from the calcaneus fracture. Follow up with the provider was scheduled on 12/11/2007, and follow-up with an orthopedist was recommended.

There are recent provider comments and good documentation early in this injured worker's course, but there needs to be better objective documentation of the his current status and clear goals on what the two additional two weeks of work hardening will attain. The notes are not clear as to whether the FCE requested in 10/07/2007 was ever done, what the results were, and how they compared with the initial FCE. A repeat evaluation of this injured worker is needed before two additional weeks of Work Hardening is considered. Therefore, the request for ten additional sessions of work hardening is deemed not medically necessary.

A DESCRIPTION AND THE SOURCE OF THE SCREENING CRITERIA OR OTHER CLINICAL BASIS USED TO MAKE THE 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 MEDICAL STANDARDS
MERCY CENTER CONSENSUS CONFERENCE GUIDELINES
MILLIMAN CARE GUIDELINES
X 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
PEER REVIEWED NATIONALLY ACCEPTED MEDICAL LITERATURE (PROVIDE A DESCRIPTION)
OTHER EVIDENCE BASED, SCIENTIFICALLY VALID, OUTCOME FOCUSED GUIDELINES (PROVIDE A DESCRIPTION)