

**DATE OF REVIEW:** 03/13/07

**IRO CASE #:**

**DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE**

The services under dispute include the following CPT codes: 64622 (Destruction by Neurolytic agent, paravertebral facet joint; lumbar or sacral, single level), 64623 (Destruction by Neurolytic agent, paravertebral facet joint; lumbar or sacral, each additional level) and 76005 (Fluoroguide; guidance).

**A DESCRIPTION OF THE QUALIFICATIONS FOR EACH PHYSICIAN OR OTHER HEALTH CARE PROVIDER WHO REVIEWED THE DECISION**

The reviewer is a board certified Orthopedic Surgeon who has greater than 10 years of experience.

**REVIEW OUTCOME**

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

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

The reviewer disagrees with the previous adverse determination regarding each disputed service.

**INFORMATION PROVIDED TO THE IRO FOR REVIEW**

Records were received and reviewed from the patient, carrier/URA and treating doctor.

Letters: 12/8/2006, 1/11/2007.

Records from Patient:

Letters: 1/8 and 2/28/2007.

MD, Reports: 7/25/2006 through 1/10/2007.

Records – Doctor/Facility:

MD, Reports: 10/26/2006 through 2/20/2007.

Records from Carrier:

Letter: 2/26/2007.

MD, Report: 3/1/2006.

**PATIENT CLINICAL HISTORY [SUMMARY]:**

This female injured her low back. Patient was moving freight and had an acute onset of low back pain. Pain is persistent in the low back and at time is sharp and stabbing with radiation in to the lower extremities.

Physical Examination reveals paralumbar muscle tightness, positive left straight leg, positive left Patrick, range of motion restricted to flexion 20 degrees and extension 20 degrees. MRI on 08/02/2004 revealed degenerative disc changes at L2-3 and 3-4 with no HNP. A repeat MRI on 04/13/2005 revealed moderate to severe degenerative disc disease at L2-3 and 3-4, with no evidence of HNP.

Treatment has consisted of ESI, medial branch blocks: 07/25/2006, 08/22/2006, 10/31/2006 and 11/17/2006. The injections provided over 70% improvement for several weeks according to the records.

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

This female has chronic low back pain for over two years. The diagnostic studies revealed degenerative disc disease. Patient has received multiple injections in the low back - first, with an ESI and then with multiple facet blocks. Patient also had medial branch electrical neuroablation. Patient responded temporarily to these procedures with 50-70% relief of pain. The nerves to the facet joints should undergo destruction with a Neurolytic agent as the next step in her minimally invasive conservative care. According to Renfrew, Atlas of Spine Injections, 2004, p73-101, the destruction of nerve technique began in 1975. The algorithm by ASIPP for somatic pain suggests several facet nerve blocks with positive results, followed by neurolysis.

**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
- 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) ASIPP Practice Guidelines, 2001 and 2005, p 13 & 42.