
Envoy Medical Systems, LP
1726 CRICKET HOLLOW DRIVE
AUSTIN, TX 78758

PH. (512) 248-9020
FAX: (512) 491-5145
IRO CERTIFICATE

OCTOBER 23, 2007 (AMENDED 11/5/07)

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE

Anterior, posterior L2-3, possible L3-4 fusion, bilateral L2-3 decompression, exploration of fusion L3-5, removal of hardware L3-5

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

M.D. Board Certified in Neurological Surgery

REVIEW OUTCOME

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

Upheld (Agree)

Overtaken (Disagree)

X Partially Overtaken (Agree in part/Disagree in part)

Provide a description of the review outcome that clearly states whether or not medical necessity exists for each of the health care services in dispute.

INFORMATION PROVIDED TO THE IRO FOR REVIEW

Adverse Determination Letters – 9/20/07, 8/23/07

Report 8/19/07, Dr.

Operative reports injections 3/6/06, 10/5/06, 11/16/06, 3/6/07, Dr.

Lumbar CT myelogram reports 7/6/07, Dr.

Letters 9/11/07, 8/14/07, Dr.

Pain management notes 2/5/04 – 9/13/07, Dr.

Report 4/9/96, Dr.

PATIENT CLINICAL HISTORY [SUMMARY]:

This case involves a xx-year-old male, who in xxxx twisted his back while lifting material from his truck. The pain continued despite conservative measures, and in 1994 an L3-S1 fusion with instrumentation was performed. The patient's pain continued, but was controlled by pain management to the point that he was able to continue working. The pain increased several months ago, and despite ESI's on four occasions, the pain has persisted. A CT myelogram on 7/6/07 suggests fresh disk rupture, probably nerve root compression at what is now described as the L2-3 level, with the level below that showing a solid fusion without definite evidence of nerve root compression. The pedicle screws are described as being intact, along with bony fusion material, and the foramina are described as, "widely patent" at the previously fused levels.

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

I agree in part and disagree in part with the denial of the proposed operative procedure. I disagree with the denial of bilateral L2-3 decompression. I agree with the denial of Anterior, posterior L2-3, possible L3-4 fusion, exploration of fusion L3-5, removal of hardware L3-5.

Based on the records provided for this review, the L2-3 level is a probably enough source of the patient's difficulty that an operative procedure consisting of disk removal and decompression would be indicated.

The records, however, do not support the extensive procedure recommended at the levels below the L2-3 level. The patient's difficulty has recently developed to the extent that this evaluation has been necessary, and there is nothing to suggest that the rather old fusion is a source of his trouble. The most recent change is at the level above the fusion, and that is the level that needs to be dealt with surgically.

This opinion does not diverge from ODG guidelines.

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)