



Southwestern Forensic
Associates, Inc.

REVIEWER'S REPORT

DATE OF REVIEW: January 30, 2008

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Admission to a chronic pain management program.

DESCRIPTION OF QUALIFICATIONS OF REVIEWER:

D.C., D.O., M.S., Board Certified Physiatrist, Board Certified in Chiropractic, Physical Medicine and Rehabilitation, as well as certified in Pain Management.

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)

INFORMATION PROVIDED FOR REVIEW:

A note from Dr. dated 06/09/2007. This was after he received 10-15% improvement following a right ilioinguinal nerve block. This physician felt that he did not believe the problem was an inguinal nerve problem, facet problem or disc problem, but wanted his right hip evaluated further.

An orthopedic consultation from Dr. dated 08/29/2007. He found very little objective findings, but raised a question of traction nerve injury and recommended an EMG because he really did not find anything else on his exam to corroborate the complaints.

On 10/17/2007 an EMG on the lumbar spine and bilateral lower extremities found no abnormalities.

He had an evaluation on 11/02/2007, to counselor who diagnosed a chronic pain condition. There was a physical performance examination performed by chiropractor. On 11/23/2007, he was seen again by. I reviewed an 11/26/2007 review from Dr.

A physician review report of Dr. Ph.D.

ODG Guidelines were not presented for review.

INJURED EMPLOYEE CLINICAL HISTORY (Summary):

He apparently was complaining of pain in his right thigh related to a work injury. He apparently was backing his truck into a dock and hit the doc and had a jarring incident. When he went to get out of his truck cab he had pain in his right groin and into his right thigh. He had had an MRI of his lower back which was previously reviewed. He apparently had an MRI of his hip as well as a bone scan, both of which were unremarkable according to Dr. 's notes. He was seen apparently by chiropractor, Dr.. He saw Dr.. He had an inguinal hernia ruled out. He had no success with an inguinal nerve block.

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

The injured employee has no documented injury at this point, only subjective complaints. An inguinal hernia has been ruled out. The facets and the discs in the back have been ruled out as pain generators. The right inguinal nerve was felt to be problematic, but that was subsequently ruled out as well. Dr. felt that there may be a problem with regards to a traction nerve injury as his only differential diagnosis that had not been addressed. This was addressed with a negative EMG, ruling that out as well. Without an objective basis of a condition for which the pain program would be designed to treat, I do not believe that is reasonable.

DESCRIPTION AND SOURCE OF THE SCREENING CRITERIA OR OTHER CLINICAL BASIS USED TO MAKE YOUR DECISION:

(Check any of the following that were used in the course of your review.)

- 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.
- 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.)