



Medical Review Institute of America, Inc.
America's External Review Network

DATE OF REVIEW: January 31, 2008

IRO Case #:

Description of the services in dispute:

Preauthorization - Left knee arthroplasty with a three day length of stay.

A description of the qualifications for each physician or other health care provider who reviewed the decision

The physician who provided this review is board certified by the American Board of Orthopaedic Surgery. This reviewer completed a fellowship in Pediatric Orthopaedic Surgery. This reviewer is a member of the American Academy of Orthopaedic Surgeons and the Pediatric Orthopaedic Society of North America. This reviewer has been in active practice since 2000.

Review Outcome

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

Upheld

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.

Medical necessity does not exist for the requested left knee arthroplasty with a three day length of stay.

Information provided to the IRO for review

Records Received From the State:

Fax from Department of Insurance, 1/15/08, 3 pages

Fax from Department of Insurance, 1/14/08, 4 pages

Notice to Medical Review Institute of America, Inc of case assignment, 1/14/08, 1 page

Confirmation of receipt of a request for a review by an independent review organization, 1/11/08, 5 pages

Request for a review by an independent review organization, 1/10/08, 3 pages

Records Received From the Carrier:

List of providers, undated, 2 pages

Report of medical evaluation, 4/5/07, 1 page

History and physical. 4/5/07, 4 pages
Notification of determination, 1/18/07, 5 pages
Letter from MD, 12/14/07, 1 page
Letter from 12/27/07, 2 pages
Utilization review request, 1/4/08, 4 pages
Utilization review, 1/14/08, 2 pages

Records Received From the Provider:

Letter from MD, 1/21/03, 2 pages
Radiology report, 1/28/03, 1 page
Letter from MD, 1/28/03, 2 pages
ECG report, 1/28/03, 1 page
Radiology report, 1/28/30, 1 age
Lab report, 1/28/03, 1 page
Operative report, 2/3/03, 4 pages
Letter from MD, 2/6/03, 1 page
Patient note, 2/11/03, 2 pages
Progress note, 2/14/03, 1 page
Progress note, 2/19/03, 1 page
Letter from MD, 2/20/03, 2 pages
Progress note, 2/21/03, 1 page
Progress note, 3/5/03, 1 page
Letter from MD, 3/6/03, 1 page
Progress note, 3/12/03, 1 page
Letter from MD, 3/20/03, 1 page
ECG report, 3/21/03, 1 page
Lab report, 3/22/03, 1 page
Operative report, 3/28/03, 2 pages
Letter from PT, CS, 4/7/03, 1 page
Shoulder evaluation, 4/7/03, 2 pages
Manual muscle test, undated, 1 page
Letter from MD 4/8/03, 1 page
Progress note, 4/25/03, 1 page
Letter from MD, 4/29/03, 1 page
Letter from MD, 5/20/03, 1 page
Letter from MD, 6/17/03, 1 page
Letter from MD, 7/15/03, 1 page
Letter from MD, 8/12/03, 1 page
Letter from MD, 8/26/06, 1 page
Letter from MD, 9/16/03, 1 page
Letter from MD, 10/14/03, 1 page
Letter from MD, 11/11/03, 1 page

Letter from MD, 12/9/03, 1 page
Letter from MD, 6/3/04, 1 page
Letter from MD, 6/17/04, 1 page
Operative report, 6/30/04, 3 pages
Letter from MD, 7/6/04, 1 page
Letter from MD, 7/20/04, 1 page
Letter from MD, 8/3/04, 1 page
Postoperative note, 8/10/04, 2 pages
Postoperative note, 8/31/04, 1 page
Postoperative note, 9/7/04, 2 pages
Postoperative note, 10/5/04, 2 pages
Postoperative note, 11/16/04, 2 pages
Postoperative note, 1/11/05, 2 pages
Postoperative note, 2/22/05, 2 pages
Postoperative note, 4/5/05, 3 pages
Interdisciplinary assessment, 4/14/05, 3 pages
Evaluation note, 7/26/05, 2 pages
MRI report, 8/3/05, 2 pages
Chart note, 8/16/05, 1 page
History and physical, 8/23/05, 3 pages
Chart note, 9/20/05, 2 pages
Telephone conversation, 9/20/05, 1 page
Preoperative note, 10/6/05, 1 page
Operative report, 10/12/05, 5 pages
Discharge summary, 10/14/05, 3 pages
Office note, 10/25/05, 1 page
Chart note, 11/1/05, 2 pages
Office note, 11/1/05, 1 page
Telephone conversation, 11/3/05, 1 page
Office note, 11/8/05, 1 page
Physical therapy initial report, 11/8/05, 3 pages
Chart note, 11/29/05, 2 pages
Chart note, 12/27/05, 2 pages
Chart note, 2/7/06, 2 pages
Chart note, 2/23/06, 2 pages
Chart note, 3/7/06, 2 pages
Chart note, 6/8/06, 2 pages
Letter from MD, 6/27/06, 1 page
Letter from MD, 8/3/06, 2 pages
Letter from MD, 8/24/06, 2 pages
Letter from MD, 9/5/06, 1 page
Physical therapy initial evaluation, 9/11/06, 3 pages

Letter from 9/14/06, 1 page
Letter from 9/28/06, 1 page
Physical therapy re-evaluation, 10/18/06, 3 pages
Letter from 11/7/06, 1 page ECG
report, 11/7/06, 1 page Hematology
report, 11/7/06, 1 page Chemistry
report, 11/7/06, 1 page
PA and lateral chest report, 11/9/06, 1 page
History and physical, 11/13/06, 1 page
Preoperative routine orders, 11/13/06, 1 page
Operative report, 11/13/06, 4 pages
Letter from MD, 11/16/06, 1 page
Physical therapy evaluation, 11/16/06, 3 pages
Letter from 11/28/06, 1 page
History and physical, 12/8/06, 2 pages
Letter from 12/19/06, 1 page
Letter from 1/16/07, 1 page
Letter from 2/13/07, 1 page
Letter from 3/13/07, 1 page
Letter from 4/10/07, 1 page
Letter from 4/24/07, 1 page
Letter from 6/19/07, 1 page
Letter from 9/20/07, 1 page
Letter from 10/1/07, 2 pages
Letter from MD, 10/29/07, 1 page
Notice of assignment of independent review organization, 1/14/08, 1 page

Records Received

MRI report, 12/17/02, 5 pages
MRI report, 11/13/03, 2 pages
Workers' Compensation work status report, 4/24/07, 1 page
Workers' Compensation work status report, 6/19/07, 1 page
Office note, 6/19/07, 1 page
Letter from 6/26/07, 1 page
Letter, 9/17/07, 1 page
Workers' Compensation work status report, 10/1/07, 1 page
Workers' Compensation work status report, 10/29/07, 1 page
Letter from Insurance Company, 11/19/07, 1 page
Letter from 1/18/08, 1 page
Fax cover sheet from 1/15/08, 1 page
Fax cover sheet from 12/27/07, 1 page
Fax cover sheet from Insurance Company, 1/14/08, 2 pages

Successful fax notice, 8/28/07-1/14/08, 5 pages
 Fax cover sheet from Insurance Company, 1/17/08, 1 page
 Letter from 1/17/08, 1 page

Patient clinical history [summary]

The patient is a xx-year-old male sustained in a fall backwards from the ground level. Left total knee arthroplasty has been requested by Dr. due to severe tri-compartmental arthritis and persistent pain despite conservative measures. The patient has undergone five prior operations since his initial injury, including right knee arthroscopy twice (Feb 2003 and Nov 2006), left shoulder arthroscopy once (Mar 2003), left knee arthroscopy once (Jun 2004), and lumbar spine fusion once (Oct 2005). All operations have failed to provide lasting pain relief in the organ system operated on. Prior independent reviews by Dr. (Jan 2008) and Dr. (Jan 2008) have both not certified the proposed left total knee arthroplasty (: lack of documentation of arthritis and failure of conservative treatment) (: conservative measures not exhausted).

Analysis and explanation of the decision include clinical basis, findings and conclusions used to support the decision.

Based on the records presented in this review, there is sufficient data to confirm that TKA (total knee arthroplasty) would be indicated based on imaging and surgical findings consistent with three-compartment arthritis (ODG indications for surgery--TKA). Additionally, records over several years indicate that the patient has chronically used medications to control pain (ODG indications for surgery--TKA, bullet 1). Of note, neither Visco-supplementation nor steroid injections are required elements for certification. Limited range of motion is documented in Dr. letter dated 12/14/07 (ODG indications for surgery--TKA, bullet 2). The patient satisfies the objective criteria for TKA based on age over 50 (the patient's date of birth is 9/8/1951), however, there is no documentation of his BMI (body mass index), which is a requirement for satisfying this criteria (ODG indications for surgery--TKA, bullet 3).

Very few objective measures of the patient's height and weight were found in the documentation presented. Following, in table form, the data supplied is presented: the source, the date, and the calculated BMI using the formula supplied by the Department of Health and Human Services, National Institutes of Health.

Date	Document	Height	Weight	Calc BMI
8/23/05	History ad physical	74 inches	250 lbs.	32.1
11/8/05	Therapy Works note	73.5 in.	237 lbs.	30.8
11/18/08	Therapy Works note	73.5 in.	237 lbs.	30.8
9/11/06	Therapy Works note	72.5 in.	236 lbs.	31.6
10/18/06	Therapy Works note	72.5 in.	236 lbs.	31.6
11/16/06	Therapy Works note	72.5 in.	236 lbs.	31.6
12/8/06	note	?	256 lbs.	?*

*Assuming that the patient is between 72 and 73.5 inches, then the calculated BMI would be between 33.3 and 34.7. If the patient has continued losing height and his weight stays constant since 8 Dec 2006, he could easily now have a BMI over 35.

There is no documentation presented since 11/16/06 regarding both the patient's weight and height. A recent BMI cannot be calculated. There is also significant question as to whether the patient's current BMI would be under 35 since the data suggest a gradual elevation of his BMI between 23 Aug 2005 and 8 Dec 2006.

Documentation of BMI is a required element of ODG indications for surgery--TKA (see below). Without documentation of a recent and accurate BMI, the procedure cannot be considered medically necessary.

A description and the source of the screening criteria or other clinical basis used to make the decision:

ODG Treatment Index, Knee and Leg, Knee Joint Replacement

Body Mass Index calculator

ODG Treatment Index, Knee and Leg, Knee Joint Replacement

Dept. of Health and Human Services, National Institutes of Health BMI calculator website

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