DATE OF REVIEW: June 20, 2008

IRO Case #:

Description of the services in dispute:
Preauthorization – Right Carpal Tunnel Release – CPT #29848

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 is a member of the American Academy of Orthopedic Surgeons and the American Medical Association. This reviewer has been in active practice since 1985.

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

Overturned

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 exist for the requested Right Carpal Tunnel Release – CPT #29848.

Information provided to the IRO for review
Records Received From the State:
Fax cover sheet, 6/4/08, 1 page
Fax cover sheet, 6/3/08, 2 pages
Notice to Medical Review Institute of America, Inc. of case assignment, 6/24/08, 1 page
Confirmation of receipt of a request for a review by an independent review organization, 6/3/08, 7 pages
Letter 5/12/08, 2 pages
Letter 5/28/08, 3 pages

Records Received From the Carrier:

Letter 6/6/08, 1 page
Job description, 1 page
Independent review organization summary, 6/6/08, 2 pages
Employer's first report of injury or illness 1 page
Notice of disputed issue(s) and refusal to pay benefits, 9/14/06, 1 page
Notice of disputed issue(s) and refusal to pay benefits, 4/23/07, 1 page
Letter 4/4/08, 2 pages
Progress notes, 6/20/06, 1 page
Return to work/school statement, 6/24/06, 1 page
Emergency room note, 6/24/06, 2 pages
Emergency room history and physical, 6/24/06, 2 pages
Progress notes, illegible date, 2 pages
Appointment verification, 7/3/06, 2 pages
Worker's Compensation request for medical care, 7/17/06, 1 page
Texas Workers' Compensation work status report, 8/24/06, 1 page
Physician activity status report, 7/23/06, 1 page
Transcription, 8/7/06, 2 pages
Texas Workers' Compensation work status report, 9/1/06, 1 page
Physician activity status report, 8/21/06, 1 page
Transcription, 8/21/06, 2 pages
Texas Workers' Compensation work status report, 9/1/06, 1 page
Transcription, 8/28/06, 2 pages
Physician activity status report, 7/28/06, 1 page
Texas Workers' Compensation work status report, 9/13/06, 1 page
Report of medical evaluation, 9/11/06, 1 page
Narrative report, 9/11/06, 1 page
Transcription, 9/11/06, 2 pages
Return to work form, 12/18/06, 1 pafe
Report of medical evaluation, 12/27/06, 1 page
Letter from MD, 12/27/06, 5 pages
Texas Workers Compensation work status report, 12/26/06, 1 page
Exam notes, 12/28/06, 2 pages
Letter from MD, 2 pages
Case management note, 6/13/06, 1 page
Occupational therapy evaluation summary, 1/15/07, 1 page
Counseling note, 1/12/07, 5 pages
Case management note, 1/17/07, 2 page
Range of motion exam, 1/18/07, 5 pages

Case management note, 1/24/07, 1 page
Texas Workers' Compensation work status report, illegible date, 1 page
Office notes, 1/29/07, 1 page
Exam notes, 2/5/07, 1 page
Evaluation, 2/5/07, 7 pages
MRI report, 2/12/07, 2 pages
Texas Workers' compensation work status report, 3/5/07, 1 page
Office notes, 3/5/07, 1 page
Exam notes, 3/5/07, 1 page
Letter from 3/15/07, 3 pages
Nerve conduction studies – upper extremities, 3/15/07, 2 pages
Texas Workers' Compensation work status report, 3/21/07, 1 page
Required medical examination, 3/16/07, 6 pages
Texas Workers' Compensation work status report, undated, 1 page
Office notes, 4/2/07, 1 page
Letter from Dr. 4/8/07, 1 page
Office note, 4/30/07, 1 page
Letter from Dr. 5/4/07, 1 page
Letter 5/10/07, 2 pages
Texas Workers' Compensation work status report, 5/11/07, 1 page
Letter from Dr. 5/14/07, 1 page
Texas Workers' Compensation work status report, 5/14/07, 1 page
Office notes, 5/14/07, 1 page
Operative report, 5/15/07, 2 pages
Office notes, 5/23/07, 1 page
Occupational therapy evaluation summary, 5/30/07, 1 page
Texas Workers' Compensation work status report, 6/13/07, 1 page
Occupational therapy daily notes, 6/11/07, 1 page
Patient information, 6/11/07, 2 pages
Patient information, 6/13/07, 5 pages
Office note, 7/10/07, 1 page
Texas Workers' Compensation work status report, 7/17/07, 1 page
Office notes, 7/17/07, 1 page
Letter from Dr. 7/20/07, 1 page
Letter from Dr. DC, DABCO, 7/24/07, 1 page
Texas Workers' Compensation work status report, 7/31/07, 1 page
Office notes, 7/31/07, 1 page
Follow up office note, 8/15/07, 1 page
Texas Workers' Compensation work status report, 9/1/07, 1 page

Office notes, 8/15/07, 1 page
Exam report, 6/13/06, 1 page
Prescription, 8/20/07, 1 page
Exam report, 8/20/07, 1 page
Prescription, 8/20/07, 1 page
Case management note, 8/22/07, 1 page
Case management note, 8/29/07, 1 page
Report of medical evaluation, 12/4/07, 1 page
Texas Workers' Compensation work status report, 9/12/07, 1 page
Designated doctor evaluation, 7/3/06, 5 pages
Report of medical evaluation, 9/4/07, 1 page
Report of medical evolution, 9/4/07, 1 page
Case management note, 9/5/07, 1 page
Residual functional capacity battery, 9/6/07, 5 pages
Case management note, 9/12/07, 1 page
Office notes, 9/12/07, 1 page
Texas Workers' Compensation work status report, 9/17/07, 1 page
Exam report, 6/13/06, 1 page
Case management note, 9/19/07, 1 page
Case management note, 10/3/07, 1 page
Case management note, 10/10/07, 1 page
Texas Workers' Compensation work status report, 10/15/07, 1 page
Exam report, 6/16/06, 1 page
Office note, 10/15/07, 1 page
Case management note, 10/17/07, 1 page
Return to work notice, 10/22/07, 1 page
Case management note, 10/24/07, 1 page
Exam report, 11/5/07, 1 page
Prescription, 11/5/07, 1 page
Case management note, 11/7/07, 1 page
Texas Workers' Compensation work status report, 11/12/07, 1 page
Letter from MD, 11/12/07, 3 pages
Office note, 11/13/07, 1 page
Case management note, 11/14/07, 1 page
Office visit notes, 11/16/07, 1 page
Case management note, 11/21/07, 1 page
Case management note, 11/28/07, 1 page
Case management note, 12/5/07, 1 page
Office note, 12/05/07, 1 page

Texas Workers' Compensation work status report, 12/10/07, 1 page
Office note, 12/12/07, 1 page
Case management note, 12/12/07, 1 page
Case management note, 12/19/07, 1 page
Case management note, 12/26/07, 1 page
Case management note, 1/2/08, 1 page
Case management note, 1/9/08, 1 page
Texas Workers' Compensation work status report, 1/10/08, 1 page
Office note, 1/10/08, 1 page
Office note, 1/14/08, 1 page
Patient information, 1/14/08, 7 pages
Office note, 1/18/06, 1 page
Case management note, 1/23/08, 1 page
Office note, 1/30/08, 1 page
Letter from Dr. 2/1/08, 1 page
Texas Workers' Compensation work status report, 3/8/08, 1 page
Office note, 2/8/08, 1 page
Office note, 2/11/08, 1 page
Case management note, 2/13/08, 1 page
Office note, 2/18/08, 1 page
Case management note, 2/20/08, 1 page
Office note, 2/29/08, 1 page
Counseling note, 3/5/08, 1 page
Texas Workers' Compensation work status report, 4/7/08, 1 page
Conference note, 3/12/08, 1 page
Office note, 3/13/08, 1 page
Office note, 3/17/08, 1 page
Patient information, 3/17/08, 1 page
Prescription, 3/17/08, 1 page
Conference note, 3/18/08, 1 page
Initial mental health evaluation, 3/20/08, 5 page
Office note, 4/2/08, 1 page
Psychotherapy progress note, 4/2/08, 1 page
Rehab note, 4/3/08, 5 pages
EMG/nerve conduction study, 4/3/08, 2 pages
Texas Workers' Compensation work status report, 4/7/08, 1 page
Office note, 4/7/08, 1 page
Psychotherapy progress note, 4/9/08, 1 page
Office note, 4/14/08, 1 page

Psychotherapy note, 4/14/08, 1 page
Office note, 4/21/08, 1 page
Office note, 4/24/08, 1 page
Office note, 4/29/08, 1 page
Psychotherapy progress note, 4/23/08, 2 pages
Letter from Dr. 5/2/08, 1 page
Psychotherapy progress note, 5/5/08, 1 page
Texas Workers' Compensation work status report, 5/6/08, 1 page
Office note, 5/6/08, 1 page
Letter from Dr. 5/19/08, 1 page
Texas Workers' Compensation work status report, 6/3/08, 1 page
Case management note, 2/6/08, 1 page
Check co0py, 6/5/08, 1 page
Letter 6/6/08, 1 page
Fax cover sheet, 6/3/08, 1 page

Patient clinical history [summary]

The patient had dates of injury of xx/xx/xx and xx/xx/xx. The patient's job activities are noted to be those of a cashier. The patient has a history of a ganglion cyst and excision. Paresthesias were documented at the evaluation for the wrist and hand pain on 6/24/06. Paresthesias in the median nerve distribution were noted on 7/3/06 as an outpatient as was carpal tunnel syndrome. The tinel sign was positive. Carpal tunnel syndrome was felt to be the impression on 7/24/06 CSA. NCVs (nerve conduction velocities) were felt to be indicated. An IME (independent medical examination) from 10/27/06 revealed the possibility of carpal tunnel syndrome. The electrodiagnostic of 1/2/07 revealed carpal tunnel syndrome, mild, although the 3/15/07 test was normal. An RME (required medical examination) on 3/16/07 was noted to opine a lack of causation of CTS (carpal tunnel syndrome). "Mild to moderate" CTS was noted by the designated doctor on 9/4/07 (clarified on 11/12/07), with an indication for surgery as likely causally related to the date of injury. Progressive symptoms were noted on 2/29/08 by Dr.

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

The requested carpal tunnel release, CPT #29848, is medically necessary. The diagnosis is a clinical condition that does not always reflect a consistently positive electrodiagnostic test. Causation is evident, and the condition has progressed from mild to moderate, and, has persisted despite reasonable activity restrictions and non-operative treatment.

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

decision:

ODG Guidelines regarding carpal tunnel release surgery for carpal tunnel syndrome

Carpal tunnel release (CTR) is recommended after an accurate diagnosis of moderate or severe CTS. Surgery is not generally initially indicated for mild CTS, unless symptoms persist after conservative treatment. See Severity definitions. Carpal tunnel release is well supported; both open and endoscopic (with proper surgeon training). Outcomes in workers' comp cases may not be as good as outcomes overall, but studies still support the benefits from surgery. Carpal tunnel syndrome may be treated initially with education, activity modification, medications and night splints before injection is considered, except in the case of severe CTS (thenar muscle atrophy and constant paresthesias in the median innervated digits), but outcomes from carpal tunnel surgery justify prompt referral for surgery in moderate to severe cases.