

I-Resolutions Inc.

An Independent Review Organization

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Notice of Independent Review Decision

DATE OF REVIEW: MARCH 23, 2008

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE

Sciatic Nerve Block x 2 (Left and Right)

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

MD, Board Certified in Pain Management and Anesthesiology

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)

INFORMATION PROVIDED TO THE IRO FOR REVIEW

Adverse Determination Letters, 2/4/08, 2/13/08

ODG Treatment Guidelines, 5th Edition, Low Back Chapter

MD, 6/30/03, 6/24/03

MD, 5/3/07, 5/21/07, 6/4/07, 6/19/07, 7/19/07, 9/20/07, 1/3/08, 1/21/08, 2/4/08

MD, 3/19/03

DO, 5/15/06, 5/9/06, 12/13/06, 1/22/07, 2/21/07, 3/12/07, 3/20/07, 4/9/07, 4/18/07, 4/23/07, 6/13/07, 7/10/07, 8/15/07, 10/9/07, 10/17/07, 11/12/07, 11/28/07, 1/16/08, 1/30/08, 2/5/08,

MRI of Lumbar Spine, 1/17/08

Lab Reports, Various

Nurse's Notes, 2006-2008
Lumbar Spine, 5 Views, 5/10/06
Pelvis, One View, 4/24/06

PATIENT CLINICAL HISTORY [SUMMARY]:

As of the office visit note dated 02/15/08, the patient complains of "left side pain goes into back of knee and into foot." The patient has started taking Lortab for this pain. The patient also notes "burning down both legs at times unbearable." Based on this history, a bilateral sciatic nerve block performed with Sarapin has been requested. The patient supposedly needs Sarapin because of severe side effects with steroids. The patient received a left sciatic nerve block on 10/17/07 (The medications used for this block were not documented in the information I was provided to review). The patient reported a decrease of the "average pain" from a level 7/10 down to a 5/10 approximately one month after the initial left sciatic nerve block was performed.

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

The reviewer finds that Sciatic Nerve Block x 2 (Left and Right) is not medically necessary. The *Official Disability Guidelines* does not provide any indications for the use of sciatic nerve blocks. In this case, the patient complains of "left-sided pain into the back of the knee and into the foot." There is also a statement that the patient has burning down both legs "at times." It is difficult to determine exactly what dermatomal pattern is covered by the pain that is described. The physical exam is not specific as to any neurological changes. In fact, nerve function, muscle strength and reflexes were not tested. Therefore, given that the workup for this patient is not complete, thereby questioning the diagnosis for sciatic nerve-related pain, a bilateral sciatic nerve block is not indicated at this time. In addition, a previous left sciatic nerve block only provided the patient with a decrease of pain from 7/10 to 5/10 which is not significant enough for a repeat block.

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)**