



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

DATE OF REVIEW: May 8, 2008

IRO Case #:

Description of the services in dispute:

Physical Therapy 3x week for 8 weeks

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 Arthroscopy Association of North America, the American Orthopedic Society for Sports Medicine and the American Academy of Orthopaedic Surgeons. This reviewer has been in active practice since 2003.

Review Outcome

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

Upheld

The patient has been provided 42 sessions according to information reviewed. The records do not provide information that the patient is an exception to the Official Disability Guideline recommendations and therefore the request for therapy three times a week for eight weeks at this juncture cannot be recommended and is not medically necessary.

Information provided to the IRO for review

RECORDS RECEIVED FROM THE STATE:

Request for an Independent Review signed 4/21/08, 9 pages

Pre-Authorization Reviews 03/07/08, 03/18/08, 11 pages

RECORDS RECEIVED FROM:

Precert Request form, 1 page

Workers comp for signed 2/20/08, 1 page

Prescription for therapy, 3/1/08, 1 page

preauthorization Determination, 03/11/08, 03/21/08, 8 pages

Pre-Cert Request Form, 1 page

Printout from ODG Guidelines, 3 pages

Patient clinical history [summary]

The patient is a xx year-old male injured in an unknown manner on xx/xx/xx. Records would support that he had a fracture of the right tibial plateau and a compartment syndrome following injury. The patient had 18 therapy sessions authorized in October 2007 and 24 authorized in December 2007.

On a brief therapy report dated 02/25/08 the patient has right knee motion from 0-120 degrees. He continued to use a walker for ambulation due to ongoing pain. A request was made on 03/01/08 for additional therapy 3 times a week for 8 weeks. The request has not been certified on peer reviews dated 03/07/08 and 03/18/08. An independent review has been requested.

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

The records indicate that this patient sustained what appeared to be a significant injury to the knee with the complication of a compartment syndrome. Unfortunately, there were no records from the physician present for review to better define the nature of the injury and treatment required following the injury that might shed light on this patient's current status. There were no imaging studies present for review to determine the previous and current status of the fracture. It is unclear what the expectations for recovery are for this patient. While a therapy record of 02/25/08 indicated the patient continued to use a walker, motion at that time was functional and there was no documentation of weakness.

In a general overview of the records, the patient has had a more than adequate course of therapy. If the Official Disability Guidelines are referenced, the recommendation for a tibia/fibula fracture would be 30 sessions. The patient has been provided 42 sessions according to information reviewed. The records do not provide information that the patient is an exception to the Official Disability Guideline recommendations and therefore the request for therapy three times a week for eight weeks at this juncture cannot be recommended and is not medically necessary.

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

Official Disability Guidelines Treatment in Worker's Comp 2008, Knee

ODG Physical Therapy Guidelines -

Allow for fading of treatment frequency (from up to 3 visits per week to 1 or less), plus active self-directed home PT.

Fracture of tibia and fibula (ICD9 823)

Medical treatment: 30 visits over 12 weeks

Post-surgical treatment (ORIF): 30 visits over 12 weeks