



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

DATE OF REVIEW: May 12, 2008

IRO Case #:

Description of the services in dispute:

Right Elbow: PT #97110, #97530, #97535, #97140

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

The physician who provided this review is a fellow of the American Board of Orthopaedic Surgery. This reviewer is a fellow of the North American Spine Society and the American Academy of Orthopaedic Surgeons. This reviewer has been in active practice since 1990.

Review Outcome

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

Upheld

Physical therapy #97110, #97530, #97535, #97140 for the right elbow is not medically necessary.

Information provided to the IRO for review

1. Operative report dated 01/16/08
2. Handwritten physical therapy notes dated 01/28/08-02/29/08
3. Utilization review determination dated 03/07/08
4. Clinical note Dr dated 03/27/08
5. Utilization review determination dated 04/11/08

Patient clinical history [summary]

The patient is a female who is reported to have a date of injury of xx/xx/xx. The records indicate that the patient is currently under the care of Dr. A clinical note dated 03/27/08 indicates that the patient's symptoms began gradually four months ago. She reports no specific injury. She has noticed the problem worsening. The patient is complaining of loss of grip strength, pain in the

elbow, stiffness in the elbow, tingling in the elbow and weakness with use of the elbow. She reports that the left elbow has not previously had surgery performed on it. She has no history of a similar injury. She was reported to be doing better until two weeks ago when it got worse. She had started wearing her brace again. She had pain in her upper arm and into her neck. The patient is status post a lateral epicondylectomy with exploration of the nerve on 01/16/08. She is reported to be doing well. She has slight swelling and some pain. The wound looks good with no drainage. She presents for four week follow up on her elbow. She is reported to still continue to have pain in her elbow and hasn't been able to get very far in therapy. She is wearing her elbow brace. Records indicate on 01/16/08 the patient underwent exploration, decompression of the anterior interosseous nerve of the right elbow with a lateral epicondylectomy and reattachment of the extensor mechanism with an anchor. Postoperatively the patient began physical therapy on 01/28/08. Records indicate that the patient had a total of 12 physical therapy visits ending on 02/29/08. On 02/28/08 the patient is reported to have a range of motion of 0–130 degrees with elbow and neck pain at both end ranges of motion.

A request was placed for 12 additional sessions of physical therapy on 03/07/08. This was reviewed by Dr. Dr. reports that there is very little clinical information given. No physician generated information was supplied. He notes that there is no physician reevaluation after the current series of PT sessions and the PT notes are partially illegible. He reports that the case was discussed with Dr. who reports the patient has a flexion contracture of the elbow. PT notes give flexion and extension as being 20/100 and 128. The worker was seen by Dr. on 02/21 and his notes indicate extension and flexion of 20–120. A PT note from 02/28 indicates flexion/extension from 0–130. It is further noted that the PT notes do not provide a comparison against the unaffected side. Dr. opines that as of 02/28 the worker should be able to complete a home exercise program and would not require another month of physical therapy. Dr.'s clinical note of 03/27/08 indicates that the patient's extension is 20 degrees and flexion is 120 degrees. She has no significant sign of infections. Radiographs show no significant abnormalities. He recommends the patient utilize an elbow sleeve and writes a prescription for supervised physical therapy 3 x a week for 4 weeks. The request was appealed on 04/11/08. At this time Dr. reports that the claimant lacks 20 degrees of extension; however, there is no indication why this could not be addressed in a home exercise program. He reports the claimant has had 20 physical therapy sessions and the requesting physician has provided a lack of clinical information to support ongoing therapy. He finds the request as not certified and notes it exceeds current evidence based guidelines.

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

The reviewer would concur with the two previous providers that there is a lack of substantive clinical information to establish the medical necessity for additional physical therapy with the codes noted

above. Records indicate that the patient's date of injury is listed as xx/xx/xx. The patient is now nearly two years post date of injury and she subsequently has undergone operative intervention on xx/xx/xx. The patient underwent a lateral epicondylectomy with reattachment of the extensor mechanism with anchor and decompression of the interosseous nerve secondary to chronic epicondylitis. She has received at least 12 sessions by the documentation submitted of physical therapy. Current evidence based guidelines support up to 12 sessions of postoperative physical therapy for the patient's diagnosis. It is further noted that the record presents conflicting data. Dr. reports that the patient has a contracture with reduced range of motion being identified as 20 degrees of extension with 120 degrees of flexion. The physical therapist's notes prior to this on 02/28/08 indicate that the patient has 0-130 degrees. There is no indication based on the available medical records that the patient has aggressively pursued a self-directed home exercise program and the records do not provide sufficient clinical information to establish the medical necessity for continued supervised physical therapy.

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

The Official Disability Guidelines, 11th edition, The Work Loss Data Institute.