



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

DATE OF REVIEW: May 15, 2008

IRO Case #:

Description of the services in dispute:

Denied for Medical Necessity: Items in dispute: Right knee arthroscopy/debridement

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:

Overtured.

The proposed right knee arthroscopic procedure with possible debridement vs. repair is medically necessary at this time. Reasonable non operative treatment has failed over a two year period and the procedure is medically indicated.

Patient clinical history [summary]

As per the 8/6/05 dated summary review: the patient was noted to have had a direct blow from a large heavy object (1500 lb. saw) strike him directly onto the right leg resulting in an open fracture of the right tibia and fibula. He underwent debridement and open reduction and internal fixation of the fractures, including insertion of intramedullary rod and locking screws. Episodic pain and swelling have been documented in the immediately adjacent right knee. The knee has required treatments with medications and injections. The implants have been removed. Significant ongoing thigh atrophy was noted in June 2005. The extensive operative and postoperative records were

reviewed. The medical and physiotherapy records were also reviewed. The physiotherapy records were reviewed. The designated doctor's examination from 6/20/05 was reviewed. The patient complained of ongoing pain at the medial aspect of the right patella tendon.

Records from a Dr. from July 2005 discussed ongoing "severe pain in his right knee, leg and ankle. " He reports tenderness along both the medial and lateral joint lines but mostly medially." A right knee MRI scan from 7/16/05 revealed a small knee joint effusion, synovitis, chondromalacia patella and a cyst. There was also noted to be a " a minimal blister or fissure of medial patellar articular cartilage with surrounding...edema... synovitis." A Dr. reported ongoing knee and ankle pain as of 8/12/05. Healing in external rotation and an ongoing "painful lower extremity" was documented by a Dr. on 9/21/05. A Dr. concurred with a diagnosis of a "malunion" on 10 17 05. The malunion was surgically corrected. A Dr. documented persistent knee pain (anterolateral) on both 5/2/06 and 1/24/08 with "anterolateral joint line tenderness.) A Dr. noted persistent decreased motion of the right knee including flexion to only 100 degrees. A 10/2/06 dated note from a Dr. denoted persistent grinding and popping of the right knee. A 2/6/08 dated MRI noted chondromalacia at the medial patellar facet. On 2 11 08, Dr denoted that the claimant had failed meds and injections and therapy and had persistent pain with chondromalacia. An arthroscopic procedure was felt indicated.

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

The proposed right knee arthroscopic procedure with possible debridement vs. repair is medically necessary at this time. The claimant had a direct blow to the anterior aspect of the knee/leg and has had persistent intermittent pain, tenderness, popping and grinding to the affected knee. Posttraumatic chondromalacia appears to be a quite reasonably considered diagnosis. This claimant has an indication for evaluation of both that possible diagnosis and also the potential diagnoses of symptomatic synovitis, occult chondral lesion etc. Reasonable non operative treatment has failed over a two year period and the procedure is medically indicated.

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

ODG Guidelines re. arthroscopy

Definition: An arthroscope is a tool like a camera that allows the physician to see the inside of a joint, and the surgeon is sometimes able to perform surgery through an arthroscope, which makes recovery faster and easier. For the Knee, See Meniscectomy or Diagnostic arthroscopy.

ODG Indications for Surgery -- Diagnostic arthroscopy:

Criteria for diagnostic arthroscopy:

1. Conservative Care: Medications. OR Physical therapy. PLUS
2. Subjective Clinical Findings: Pain and functional limitations continue despite conservative care.  
PLUS
3. Imaging Clinical Findings: Imaging is inconclusive.

ODG Indications for Surgery -- Chondroplasty:

Criteria for chondroplasty (shaving or debridement of an articular surface):

1. Conservative Care: Medication. OR Physical therapy. PLUS
2. Subjective Clinical Findings: Joint pain. AND Swelling. PLUS
3. Objective Clinical Findings: Effusion. OR Crepitus. OR Limited range of motion.  
(Washington, 2003) (Hunt, 2002) (Janecki, 1998)