



Specialty Independent Review Organization

Notice of Independent Review Decision

DATE OF REVIEW: 9/8/2008

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE

The item in dispute is the prospective medical necessity of a transposition of the right ulnar nerve with forearm flexor tendon lengthening.

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

The reviewer is a licensed Osteopathic Doctor with a specialty in Orthopedic Surgery and a board certification in Orthopedic Surgery.

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)

The reviewer disagrees with the previous adverse determination regarding the prospective medical necessity of a transposition of the right ulnar nerve with forearm flexor tendon lengthening.

A copy of the ODG was not provided for this review.

PATIENT CLINICAL HISTORY (SUMMARY):

This female currently complains of pain, weakness, numbness in her right arm to her hand. Presently patient has a decreased range of motion to the right elbow and all planes, tender ulnar nerve and lateral epicondyle with numbness, tingling of the right little and ring fingers.

Patient was injured on xx/xx/xx. She was lifting a 24 pack case of water and two 50 pound bags of dog food off a regular sized belt which was apparently overweight for the patient and she developed a popping sensation and burning pain in the right elbow. Pain extended down to her right little and ring fingers. Location of the pain has been the same since injury, only it has become worse. Patient has been treated with physical therapy, bracing, medications without relief.

Physical examination shows severe tenderness over the right lateral epicondyle

and the common extensor tendon origin. The pain is present with stress testing for the lateral collateral ligament, Cozen sign is positive for lateral epicondylitis. Patient also has a positive Tinel and a positive compression test of the ulnar nerve at the elbow. Patient has weakness of the intrinsic muscles and altered two-point discrimination in the little and ring fingers of the right hand.

MRI of 03/28/2008 reveals tears involving the radial collateral ligament and the conjoined tendon of the extensors of the right elbow. EMG of 05/15/2008 reveals ulnar motor neuropathy at the elbow.

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

The reviewer states that this patient fits the ODG criteria for surgery with failure of more than three months of exercises, activity modification, medications, and splint. Patient has the tear of the lateral conjoined tendon and has EMG evidence together with physical findings of a tardy ulnar nerve palsy at the elbow.

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)**
 - Campbell's Operative Orthopaedics, 10th Edition
 - Trumble, Budoff, Cornwell: Hand, Elbow, Shoulder Core Knowledge
 - Cole and Sekiya: Surgical Techniques of Shoulder, Elbow, and Knee