ZRC MEDICAL RESOLUTIONS INC

Amended April 10, 2009

DATE OF REVIEW: 03/24/09

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:
Request for four sessions of cognitive behavioral psychotherapy.

DESCRIPTION OF QUALIFICATIONS OF REVIEWER:
M.D., board certified in Psychiatry

REVIEW OUTCOME:
"Upon independent review, I find that the previous adverse determination or determinations should be (check only one):

_____Upheld (Agree)

__X __Overturned (Disagree)

_____Partially Overturned (Agree in part/Disagree in part)

INFORMATION PROVIDED FOR REVIEW:

1. TDI Referral
2. URA findings, 2/19 to 3/2/09
3. office notes, 2/13 to 3/4/09
4. Injury Center office notes, 1/21/09

INJURED EMPLOYEE CLINICAL HISTORY (Summary):
This patient was injured at work on xx/xx/xx. She had a fall in which there was loss of consciousness. She required transportation to the hospital via helicopter with spinal precautions. She has been diagnosed with thoracic compression fracture, radiculitis, left hip contusion, left hip pain, and left knee internal derangement. She has had conservative medical treatment. Currently she is taking pain medications. In September 2008 her physician recommended physical therapy for the lumbar, hip, and knee problems and continued the patient on limited duty. The patient requested a second opinion. The second opinion consultant noted significant lower thoracic spine pain as well as left knee pain in addition to low back pain, left hip pain, and other sore areas. The second opinion doctor as well as the first opinion doctor noted that psychiatric or psychological treatment

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to help the patient deal with pain and improve her coping ability would be a recommendation, as well. An evaluation was done by a chronic pain management clinic, in February 2009. They found she had a number of psychological symptoms that appear to impact her recovery from her injury including sadness, decreased appetite, insomnia, decreased energy, irritability, crying episodes, helplessness, decreased libido, hopelessness, short temper, as well as others. She had no previous psychiatric treatment. On the Beck Depression Inventory, she scored 38. The screen for opioid assessment for patients in pain was in the positive range, putting her at high risk for abuse of prescribed narcotic pain medications. As a result of the evaluation, four sessions of cognitively oriented psychotherapy were recommended to help the pain improve her coping skills.

ANALYSIS AND EXPLANATION OF THE DECISION, INCLUDING CLINICAL BASIS, FINDINGS AND CONCLUSIONS USED TO SUPPORT DECISION:
The ODG Guidelines for cognitive behavioral therapy state that it is recommended as an option for patients with chronic low back pain and delayed recovery. It is to be considered if there is lack of progress from physical therapy alone. This patient had already received physical therapy, she had used a TENS unit, and she had ongoing treatment with medications for her pain and still was not improving at six months post injury. Therefore, the ODG Guidelines for cognitive behavioral therapy are met.

DESCRIPTION AND SOURCE OF THE SCREENING CRITERIA OR OTHER CLINICAL BASIS USED TO MAKE YOUR DECISION:
(Check any of the following that were used in the course of your review.)

_____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 judgment, clinical experience and expertise in accordance with accepted medical standards.
_____Mercy Center Consensus Conference Guidelines.
_____Milliman Care Guidelines.
__X __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 national accepted medical literature (provide a description).
_____Other evidence-based, scientifically valid, outcome-focused guidelines (provide a description.)