



Southwestern Forensic
Associates, Inc.

REVIEWER'S REPORT

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Cervical epidural steroid injection with catheter placement

DESCRIPTION OF QUALIFICATIONS OF REVIEWER:

M.D., Board Certified in Anesthesiology by the American Board of Anesthesiology with Certificate of Added Qualifications in Pain Management, in practice of Pain Management full time since 1993

REVIEW OUTCOME:

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

Upheld (Agree)

Overturned (Disagree)

Partially Overturned (Agree in part/Disagree in part)

The ODG criteria have not been met for cervical epidural steroid injection.

INFORMATION PROVIDED FOR REVIEW:

1. Denial information
2. Records from Dr., 11/11/09 thru 4/29/10
3. Operative report, 3/24/10, DO
4. Operative report, 1/30/10, DO
5. MRI, 5/24/08

INJURED EMPLOYEE CLINICAL HISTORY (Summary):

This individual was injured on xx/xx/xx when she was involved in a motor vehicle accident. Medications have been utilized. MRI scan shows a C5/C6 herniated disc. There is persistent neck and arm pain. A cervical epidural steroid injection at C7/T1 was performed on 01/13/10, which resulted in 70% pain relief. On 03/24/10 a second epidural steroid injection was performed, which was noted to be at C4 through C6. Followup office visit on 04/29/10 shows notation that the procedure resulted in 60% pain relief.

ANALYSIS AND EXPLANATION OF THE DECISION, INCLUDING CLINICAL BASIS, FINDINGS AND CONCLUSIONS USED TO SUPPORT DECISION:

The ODG criteria state there should be 50%-70% pain relief for six to eight weeks after the procedure. There is no update in the clinical records as to whether this criteria was met. Also, there is no recent physical examination documenting radicular findings.

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.
- 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.)