



Southwestern Forensic  
Associates, Inc.

**REVIEWER'S REPORT**

**IRO CASE #:**

**DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:**

Right ankle injection using fluoroscopic ultrasound

**DESCRIPTION OF QUALIFICATIONS OF REVIEWER:**

M.D., board certified in Orthopedic Surgery

**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)

**INFORMATION PROVIDED FOR REVIEW:**

1. TDI referral
2. URA referral form
3. Medical Group progress notes
4. New patient intake forms 12/14/09
5. Follow-up note, 01/07/10
6. X-ray report, Family Practice Clinic, right ankle, 10/21/09
7. Supervisor Accident Investigation Report, unsigned
8. MRI scan, right ankle, 01/18/10
9. Notes from Sports Medicine Associates, Dr., D.P.M., 02/22/10
10. Medical Group progress note, 01/29/10, 01/17/10
11. Sports Medicine radiology request form, 3/15/10
12. Sports Medicine Associates office visit, 03/12/10
13. MRI scan, right ankle, 02/26/10
14. Injection authorization request form, 04/21/10
15. Office note, 04/21/10, Sports Medicine Associates
16. Office visit, 04/16/10
17. Intracorp non-certification for injection, 05/21/10
18. Request/appeal, Sports Medicine Associates, for injection, 05/10
19. Sports Medicine Associates, 04/21/10, 04/16/10, 03/12/10, 06/04/10, 04/21/10
20. Radiology Imaging Center procedure report for right ankle fluoroscopic injection, 03/19/10

21. Physical Therapy progress note, 10/30/09
22. Treatment plan and flow sheets for visits 11/02/09 and 11/30/09, 12/30/09
23. Medical Group progress note, 11/13/09
24. Sports Medicine Associates follow-up note, 06/04/10

**INJURED EMPLOYEE CLINICAL HISTORY (Summary):**

The patient suffered an ankle inversion type injury and received conservative care. MRI scan demonstrated calcaneonavicular coalition with arthrosis changes. The patient's podiatrist sent the patient for a fluoroscopic injection. This was performed by a radiologist with steroid, and the patient received two weeks of pain relief. Another one has been requested. However, it has been denied by the insurance company.

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

With only two weeks of pain relief from the symptomatic coalition, I believe that the previous injection was diagnostic, however, not therapeutic. Another injection would not be medically reasonable or necessary based on the results of the first. More definitive management such as a surgical excision of the coalition or arthrodesis would be more appropriate. However, another steroid injection would not be appropriate with only a two-week response from the previous injection. However, pain relief is a good sign that the pain is coming from that area of the injection. The request is not adequately covered by the ODG Guidelines. However, the clinical history as well as reasonable medical probability would suggest that another injection would not be prudent in this case.

**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 (OKU Foot and Ankle).
- Other evidence-based, scientifically valid, outcome-focused guidelines (provide a description.)