



Southwestern Forensic
Associates, Inc.

REVIEWER'S REPORT

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

MRI scan, cervical spines

DESCRIPTION OF QUALIFICATIONS OF REVIEWER:

M.D., board certified orthopedic surgeon with extensive experience in the evaluation and treatment of patients suffering cervical strain syndrome

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. Forensics Associates forms
2. TDI referral forms
3. Fax cover sheet, 02/04/10
4. Denial letters, 03/03/10 and 02/11/10
5. Return to work statement, 10/23/07
6. Clinic, 01/19/10
7. Business records, M.D., 08/19/08
8. Medical record, 08/19/08 (illegible)
9. Nurse assessment note, 02/24/10
10. To Whom It May Concern letter, 01/25/10
11. Clinical note, 05/04/09
12. M.D.
13. Patient demographics and consent
14. Walk-in clinical notes
15. MRI scan cervical spine order
16. clinical notes, 12/22/09 and 12/15/09

17. Return to work statement, 12/15/09
18. x-ray cervical spine, lumbar spines, and left elbow, 10/30/07
19. Request medical status update, 10/29/07
20. Daily note, 10/29/07 (illegible)
21. Prescriptions, 10/18/07
22. new patient form, 10/18/07
23. Clinic note, 08/19/07
24. Clinic notes, M.D., 08/04/09 and 09/03/08 (irrelevant)
25. Lab data, 09/03/08 and 08/19/08 (irrelevant)
25. clinical note, 02/02/10 and 02/24/10
26. TWCC form 73, 02/02/10

INJURED EMPLOYEE CLINICAL HISTORY (Summary):

The patient is a female who fell on xx/xx/xx, suffering direct blow injuries to her cervical spine, lumbar spine, and right hand. She subsequently developed pain in the left elbow, reported pain in her buttocks, and her cervical spine. She has been evaluated by a number of physicians and felt to be suffering cervical strain and lumbar strain. Physical examination recorded on 02/02/10 revealed full range of motion of the cervical spines. There are no neurological deficits. She complains of some vague numbness. The distribution of the numbness is not documented. The treatment of her symptoms have been principally with nonsteroidal anti-inflammatory medication. There is no documentation of other forms of nonoperative treatment. Recently a request has been submitted for authorization to perform MRI scan of the cervical spines. This request has been considered and denied, reconsidered and denied.

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

It would appear that this patient suffered direct blow injuries to the cervical spine, lumbar spine, and other areas of the body in a fall on xx/xx/xx. It does not appear that she has suffered injuries that have defied diagnosis. There are no physical findings suggestive of cervical radiculopathy. As such, the request to perform MRI scans, cervical spines, has been considered, denied, reconsidered and denied. The denials appear to have been appropriate and should be upheld.

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, 2008, Cervical Spine Chapter, Discography passage.
- 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.)