

SENT VIA EMAIL OR FAX ON  
Apr/27/2010

## IRO Express Inc.

An Independent Review Organization

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### NOTICE OF INDEPENDENT REVIEW DECISION

**DATE OF REVIEW:**

Apr/26/2010

**IRO CASE #:**

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

Chronic Pain Management X 10

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

Board certified in Physical Medicine and Rehabilitation with expertise in pain management, wound management and geriatrics. Medical Director of Rehabilitation.

**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)

**INFORMATION PROVIDED TO THE IRO FOR REVIEW**

OD Guidelines

Denial Letters 3/19/10 and 4/1/10

Pain & Recovery 3/12/10 thru 4/9/10

Dr. 3/4/10

WCE 3/4/10

**PATIENT CLINICAL HISTORY SUMMARY**

This man has worked and the job requires heavy labor. He reported an injury xx/xx/xx after a slip and fall. He complains of pain in the back and groin. He has had therapy, medication management and psychological counseling. His pain is 9/10. He takes Lortab, Soma, neurontin and Cymbalta. His MRI on 8/28/2009 shows disc dessication with disc protrusion at L4/5. There is stenosis. EMG shows bilateral L5/S1 denervation and reinnervation. He smokes 1ppd.

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

ODG does recommend psychological evaluations in chronic pain conditions to determine if further psychosocial interventions are indicated. In the SPINE Journal, indicates that behavior and cognitive treatment does help some patients with chronic pain. However, some patients derive less benefit than others. Patients who are highly distressed and see their pain as an uncontrollable and highly negative life event derive less benefit than other patients. In this case, the patient has had psychological counseling and is treated with anti-depressants. Review of all the documentation indicates this is a highly distressed patient who will likely not benefit from a chronic pain program. He has not benefitted from previous psychological treatment ODG and MDA recommend return to as normal activity as

possible. In this case, the patient cannot at this time perform at a heavy level of work. However he could return to medium work. Expedited return to work has been shown to be more useful in improving function and decreasing pain than extended disability (Bernacki, 2000). Significant pain improvement is seen in groups that are prescribed light activity over groups that receive only medical treatment. Especially in cases involving low back pain.

**A DESCRIPTION AND THE SOURCE OF THE SCREENING CRITERIA OR OTHER CLINICAL BASIS USED TO MAKE THE DECISION**

ACOEM-AMERICA 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)