

INDEPENDENT REVIEWERS OF TEXAS, INC.

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Notice of Independent Review Decision

DATE OF REVIEW: 05/05/10

IRO CASE NO.:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Item in dispute: 6 days of Hospital In-patient stay between 03/11/2010 and 03/17/2010

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

Texas Board Certified Orthopedic Surgeon

REVIEW OUTCOME

Upon independent review, the reviewer finds that the previous adverse determination/adverse determination should be:

Denial Overturned

INFORMATION PROVIDED TO THE IRO FOR REVIEW

1. Clinical notes dated 03/11/10 - 04/19/10
2. Operative reports dated 03/11/10 and 03/15/10
3. Prior reviews dated 03/19/10 and 04/05/10
4. Coversheet and working documents
5. **Official Disability Guidelines**

PATIENT CLINICAL HISTORY (SUMMARY):

The employee is a male who sustained an injury on xx/xx/xx. A clinical note dated 03/11/10 reported the employee was injured when his left foot was crushed between a hydraulic piston and a plate welded to the floor. The employee was noted to be wearing steel-toed boots.

The employee was taken to the emergency room where he had two open areas on the foot with multiple foot fractures. The radiographs of the left foot reported findings of multiple fractures of the metatarsals including the medial aspect of the first metatarsal shaft, the third metatarsal neck, the fourth metatarsal midshaft that all appeared mildly displaced, comminution of the fracture of the first metatarsal, subtle avulsion fracture in the medial and dorsal aspect of the head of the first metatarsal, subtle nondisplaced fracture of the base of the middle phalanx of the fifth toe, subtle fracture of the medial aspect of the head of the proximal phalanx of the fifth toe could not be excluded, and marked soft tissue swelling in the dorsum of the forefoot.

An operative report dated xx/xx/xx reported the employee underwent irrigation and debridement of the open fractures of the first, third, and fourth metatarsal fractures, with open treatment of the first metatarsal fracture and open pinning of the third and fourth metatarsal shaft fractures.

A radiograph of the left foot dated 03/12/10 reported findings of Kirschner pins noted within the intramedullary aspect of the third and fourth metatarsals, transfixing the fractures into satisfactory alignment and apposition.

A clinical note dated 03/12/10 reported the employee had a wound vac in place.

An operative report dated 03/15/10 reported the employee underwent repeat irrigation and debridement of the bone first, third, and fourth metatarsal fractures with delayed wound closure, medial and dorsal foot.

A clinical note dated 03/17/10 reported that the employee was to be discharged to home.

A prior review by Dr. on 03/19/10 reported a request for six days of hospital inpatient stay was not found to be medically necessary secondary to no exceptional factors to warrant an inpatient length of stay greater than four days.

A prior review by Dr. dated 04/05/10 reported the previous retrospective request for six days of hospital inpatient stay was denied secondary to lack of documentation and no exceptional factors.

ANALYSIS AND EXPLANATION OF THE DECISION INCLUDE CLINICAL BASIS, FINDINGS, AND CONCLUSIONS USED TO SUPPORT THE DECISION.

The employee sustained a crush injury resulting in multiple fractures of the metatarsals on xx/xx/xx. The employee underwent irrigation and debridement of the open fractures of the first, third, and fourth metatarsal fractures with open treatment of the first metatarsal fracture and open pinning of the third and fourth metatarsal shaft fractures on xx/xx/xx. The employee remained an inpatient until 03/15/10 when he underwent a repeat irrigation and debridement with delayed wound closure. Practice guidelines recommend up to 4.5 days of hospital length of stay for patients with a closed fracture of one or more phalanges of the foot. The guideline recommendation for the initial surgical intervention would have facilitated the stay until 03/15/10. The employee underwent a staged procedure with delayed wound closure that is outside of the **Official Disability Guidelines** for recommendation for length of stay. The employee would have benefited from the two additional days for postoperative care after the second surgical intervention. Given that the employee underwent a second surgical intervention on 03/15/10, it is this reviewer's opinion that two additional days of inpatient stay would have been warranted.

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

Official Disability Guidelines, Foot and Ankle Chapter, Online Version
826.1 Open

Hospital Length Of Stay: 3.6 days

826.0 Closed

Hospital Length Of Stay: 4.5 days