

Clear Resolutions Inc.

An Independent Review Organization
7301 RANCH RD 620 N, STE 155-199A

Austin, TX 78726

Phone: (512) 772-4390

Fax: (512) 519-7316

Email: resolutions.manager@cri-iro.com

NOTICE OF INDEPENDENT REVIEW DECISION

DATE OF REVIEW:

Sep/04/2010

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Left Ankle Arthroscopy with Debridement of OCD, Anterior Exostectomies, and Open Peroneal Tendon Repair with Debridement

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

Doctor of Medicine (M.D.)

Board Certified in Orthopaedic Surgery

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

ODG Ankle and foot chapter

Orthopedic Knowledge Update, 9, chapter 62, Pages 767-768 (excerpt)

7/9/10, 7/19/10

Medicine 10/2/08 to 8/9/10

Medical Center 3/29/10

Imaging 12/11/08 to 6/8/10

DPM 12/8/08 to 1/15/10

Physical Therapy 1/26/09 to 1/14/10

D.O. 2/19/10, 7/2/10

Surgery Center 1/6/09

Certificate of Medical Necessity 9/28/09

Preferred Imaging 10/9/08

10/30/08

11/3/08

Physical Therapy 11/24/08

3/10/09, 3/11/09

Surgical Hospital 4/17/09

Prescription Form 7/8/09

Certificate of Medical Necessity 7/8/09

PATIENT CLINICAL HISTORY SUMMARY

The patient was injured on xx/xx/xx. He had a "twisting injury" to his ankle. The patient has had diffuse left leg, knee and ankle pain. The patient has had previous ankle arthroscopy with drilling of an OCD lesion as well as peroneal tendon repair. A new physician is recommending debridement arthroscopy as well as repeat peroneal tendon repair. Previous documentation shows that the patient did not respond well to a similar procedure in the past. The patient's symptoms are vague and include numbness in the lateral aspect of the leg and

lateral knee pain. Nerve conduction study has been negative.

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

The request for Left Ankle Arthroscopy with Debridement of OCD, Anterior Exostectomies, and Open Peroneal Tendon Repair with Debridement does not appear to be medically necessary for this xx-year-old male patient with an injury date of x/xx/xx. The patient has not responded well to previous surgery in a similar fashion by another provider. The other surgeon recommended that the patient would require an ankle fusion in the near future. With the previous poor response to similar surgery, as well as the neurological complaints and lateral knee pain that have not been adequately diagnosed, repeat ankle surgery does not appear to be medically necessary at this time. This complex case does not necessarily fit into the standard ODG guidelines. The reviewer finds that medical necessity does not exist at this time for Left Ankle Arthroscopy with Debridement of OCD, Anterior Exostectomies, and Open Peroneal Tendon Repair with Debridement.

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: Orthopedic Knowledge Update, 9, chapter 62, Pages 767-768 (excerpt)

OTHER EVIDENCE BASED, SCIENTIFICALLY VALID, OUTCOME FOCUSED GUIDELINES (PROVIDE A DESCRIPTION)