

Notice of Independent Review Decision

REVIEWER'S REPORT

DATE OF REVIEW: 04/04/11

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Injection, anesthetic agent and/or steroid, transforaminal epidural; lumbar or sacral, single level on 01/22/11.

DESCRIPTION OF QUALIFICATIONS OF REVIEWER:

M.D., board certified in Neurology with Added Qualifications in Pain Management, fellowship trained in Pain Medicine

REVIEW OUTCOME:

Upon independent review, I find that the previous adverse determination or determinations should be:

- Upheld (Agree)
 Overturned (Disagree)
 Partially Overturned (Agree in part/Disagree in part)

INFORMATION PROVIDED FOR REVIEW:

1. TDI case assignment
2. Letters of denial dated 01/26/11 and 02/04/11 as well as 02/08/11
3. Independent reviews, 02/08/10, 02/25/11, and 02/08/11
4. Precertification requests, 12/20/10 and 01/21/11
5. Radiology reports including MRI scan of the lumbar spine, 01/10/11, lumbar myelogram dated 01/11/00
6. Operative notes, 08/07/00 through 05/21/03
7. Treating doctor correspondence, 02/02/11
8. Treating doctor office evaluations and followup, 12/02/10 and 01/20/11
9. Certification of independence of the reviewer

<i>Primary Diagnosis Code</i>	<i>Service Being Denied</i>	<i>Billing Modifier</i>	<i>Type of Review</i>	<i>Units</i>	<i>Date(s) of Service</i>	<i>Amount Billed</i>	<i>Date of Injury</i>	<i>DWC Claim #</i>	<i>Upheld Overturn</i>
722.10	64483		Prosp.						Upheld
722.10	64484		Prosp.						Upheld
722.10	01991		Prosp.						Upheld

INJURED EMPLOYEE CLINICAL HISTORY (Summary):

The claimant is a female who suffered a work-related injury on xx/xx/xx resulting in low back and leg pain. She was treated with epidural steroid injections several times between the date of injury and 2003, resulting in significant pain relief. In fact, her last epidural steroid injection resulted in 60% pain relief that lasted for several years. There has been a "recurrence of the pain about four months ago," according to notes available, resulting in updated request for transforaminal epidural steroid injections with monitored anesthesia. This request has been denied first on the basis of the lack of necessity for monitored anesthesia, and next based on the necessity for the lumbar epidural steroid injection itself. Updated MRI scan apparently shows no significant change from a study from several years ago, which is interpreted as showing only mild degenerative disc disease combined with some facet arthropathy that results in some potential for foraminal stenosis.

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

I am in agreement with previous reviewers that there does not appear to be significant indication for advanced anesthesia services for the requested epidural steroid injection requested. Imaging findings apparently indicate only mild abnormalities, a portion of which includes facet arthropathy. Therefore, I am in agreement that there is no sufficient justification to proceed with updated lumbar epidural steroid injection at this time.

DESCRIPTION AND SOURCE OF THE REVIEW CRITERIA OR OTHER CLINICAL BASIS USED TO MAKE YOUR DECISION:

- ACOEM-American College of Occupational & Environmental Medicine UM Knowledgebase.
- AHCPH-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 (provide a description).
- Other evidence-based, scientifically valid, outcome-focused guidelines (provide a description.)