

Notice of Independent Review Decision

PEER REVIEWER FINAL REPORT

DATE OF REVIEW: 12/29/2010
IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Right shoulder arthroscopy and acromioplasty

QUALIFICATIONS OF THE REVIEWER:

Orthopaedics, Surgery
Trauma

REVIEW OUTCOME:

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

- | | |
|-----------------------------------------------|----------------------------|
| <input checked="" type="checkbox"/> Upheld | (Agree) |
| <input type="checkbox"/> Overturned | (Disagree) |
| <input type="checkbox"/> Partially Overturned | (Agree in part/Disagree in |

part) Right shoulder arthroscopy and acromioplasty

Upheld

INFORMATION PROVIDED TO THE IRO FOR REVIEW

INJURED EMPLOYEE CLINICAL HISTORY [SUMMARY]:

injured employee. He is a right hand dominant, hit from behind on his right shoulder x/xx/xx. He has complaints of right shoulder and knee pain. This review concentrates on the right shoulder pain. The injured employee has been treated in and. Radiographs of the shoulder indicate mild AC joint narrowing, a soft Type II acromion on May 3, 2010. A MRI from 4/5/10 was completed demonstrating mild AC joint hypertrophy downsloping acromion abutting myotendinous junction of the supraspinatus, there is infraspinatus tendonosis with posterior supraspinatus inflammation without tear. No tear. He had completed PT-7 visits at the minimum. His ROM is excellent on exam: 155 degrees forward flexion; ER to 45 degrees, motor exam 5/5 with the exception of ER which were rated 4/5. He had a positive impingement sign.

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

The injured employee (IE) history is above. The request is for a right shoulder arthroscopy and acromioplasty. The ODG guidelines for acromioplasty include

1. Conservative care for 3-6 months

- This IE had 7 visits of therapy documented. He had excellent range of motion (ROM).

2. Subjective

Pain with motion 90-130 degrees and Pain at night

- This is not documented in MD clinical exams

3. Objective findings

Weak or absent abduction; atrophy; tenderness over rotator cuff or anterior acromion.

- This is not documented

- Positive impingement sign - documented

- Relief with injection - not documented

4. Radiographs demonstrating impingement.

- The only radiographs were MD interpretation of 5/3/10 by treating MD of mild AC joint narrowing and soft type

II acromion.

MRI with impingement

- MRI demonstrates mild AC joint hypertrophy.

Overall, the request for shoulder arthroscopy and acromioplasty is denied as it does not meet ODG criteria.

There has not been adequate documentation of the diagnosis of impingement syndrome per ODG criteria. In addition, the mechanism of injury is not consistent with a diagnosis of impingement-a blow from behind is not usually associated with a chronic impingement syndrome. The recommendation is to uphold the previous denial.

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

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 JUDGEMENT, CLINICAL EXPERIENCE AND EXPERTISE IN ACCORDANCE WITH ACCEPTED

MEDICAL STANDARDS

MERCY CENTER CONSENSUS CONFERENCE GUIDELINES

MILLIMAN CARE GUIDELINES

X 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

X PEER REVIEWED NATIONALLY ACCEPTED MEDICAL LITERATURE (PROVIDE A DESCRIPTION)

OTHER EVIDENCE BASED, SCIENTIFICALLY VALID, OUTCOME FOCUSED GUIDELINES

(PROVIDE A DESCRIPTION)

Am J Sports Med. 2010 Mar;38(3):613-8. Epub 2009 Feb 2. Arthroscopic versus open acromioplasty: a meta-analysis. Davis AD, Kakar S, Moros C, Kaye EK, Schepsis AA, Voloshin I. Department of Orthopaedic Surgery, Boston University Medical Center, Boston, MA, USA.

Arthroscopy. 2008 Oct;24(10):1092-8. Epub 2008 Jun 16. Long-term outcomes of arthroscopic acromioplasty for chronic shoulder impingement syndrome: a prospective cohort study with a minimum of 12 years' follow-up.

Odenbring S, Wagner P, Atroshi I. Department of Orthopedics, Hässleholm and Kristianstad Hospitals, Hässleholm, Sweden. Sten.Odenbring@skane.se