

Becket Systems

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NOTICE OF INDEPENDENT REVIEW DECISION

DATE OF REVIEW: May 3, 2011

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Outpatient Platelet gel injections for Bilateral Elbows and Bilateral Shoulders 20926

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

Board Certified Orthopedic 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

Utilization review determination 02/02/11 regarding non-certification outpatient bilateral elbow/shoulders

Utilization review determination regarding reconsideration/appeal request outpatient platelet gel injections for bilateral elbows and bilateral shoulders, 2/28/11

Progress notes 06/16/10 through 03/30/11

New patient evaluation 05/19/10

MRI of the left elbow 03/30/10

MRI right elbow 03/30/10

Patient notes Dr. 03/29/11

Treatment progress notes MSLPC 02/15/11 and 02/22/11

Peer review MD 12/08/10

Claims file analysis 04/09/10

ODG treatment guidelines elbow chapter and shoulder chapter regarding platelet rich plasma (PRP)

PATIENT CLINICAL HISTORY SUMMARY

The injured employee is a male whose date of injury is xx/xx/xx. The injured employee reported developing severe pain and tenderness in bilateral elbows and left shoulder secondary to prolonged sprain using a heavy hot tar distributor. Records indicate treatment has included physical therapy, medications and cortisone injections to the bilateral elbows and left shoulder. The injured employee was evaluated by Dr. on 05/19/10. Physical examination reported left shoulder shows 4/4 range of motion with pain, positive supraspinatus, positive deltoid, negative apprehension. The injured employee was neurovascularly intact. Right shoulder showed full range of motion with point tenderness over the lateral epicondyle. There was weak grip strength due to pain. Impression was lateral epicondylitis right elbow; impingement left shoulder. The injured employee was recommended physical therapy for shoulder and elbow, non-steroidal anti-inflammatories and pain medications. The injured employee continued to have bilateral elbow pain and left shoulder pain. A request for outpatient platelet gel injections to the bilateral elbows and

shoulder was reviewed by Dr. Dr. determined the request as non-certified as medically necessary. Dr. noted that while it was stated the injured employee had been resistant to steroid injections, physical therapy, medications and forearm straps, there was no documentation of a comprehensive assessment of treatment completed to date and the injured employee's objective response thereto to establish failure of initiative conservative management. No therapy notes were available. Dr. noted that bilateral shoulder injection was being requested but only the left side is currently problematic.

Dr. noted there is no high quality evidence to support clinical benefits of platelet injections in management of elbow and shoulder injuries. In consideration of foregoing issues and reference guidelines, medical necessity of the requested platelet gel injections for both elbows and shoulders was not established. A reconsideration / appeal request for outpatient platelet gel injections for both elbows and shoulders was reviewed by Dr. on 02/28/11. Dr. noted the patient continues with bilateral epicondylitis and left shoulder impingement symptoms. It was noted the patient has been resistant to steroid injections, physical therapy, medications and forearm straps. However, Dr. noted that current evidence based guidelines do not support platelet gel injections in management of elbow and shoulder injuries. Therefore, medical necessity has not been established for this request.

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

The reviewer finds that Outpatient Platelet gel injections for Bilateral Elbows and Bilateral Shoulders 20926 is not indicated as medically necessary. The injured employee is noted to have sustained an overuse injury secondary to prolonged sprain using a heavy hot tar distributor. The injured employee was assessed with bilateral lateral epicondylitis and left shoulder impingement. The injured employee was treated with therapy, medications, straps, and corticosteroid injections. He continued with complaints of left shoulder impingement and bilateral epicondylitis. The proposed platelet rich plasma (PRP) injections are still undergoing clinical trials. There is no strong clinical evidence supporting this treatment. PRP is still considered investigational, and further research is needed to establish long-term safety and efficacy.

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)