



Specialty Independent Review Organization

Notice of Independent Review Decision

DATE OF REVIEW: 9/5/2011

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE

The item in dispute is the prospective medical necessity of an extension of existing fusion T5-pelvis, pedicle subtraction osteotomy lumbar and smithpete osteomies of thoracic and lumbar spine.

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

The reviewer is a Medical Doctor who is board certified in Orthopedic Surgery. The reviewer has been practicing for greater than 10 years.

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)

The reviewer agrees with the previous adverse determination regarding the prospective medical necessity of an extension of existing fusion T5-pelvis, pedicle subtraction osteotomy lumbar and smithpete osteomies of thoracic and lumbar spine.

A copy of the ODG was not provided by the Carrier or URA for this review.

PATIENT CLINICAL HISTORY (SUMMARY):

On xx/xx/xxxx, the claimant was noted to have back pain with sagittal spinal imbalance post a lumbar fusion revision on 4/18/11 (a staged anterior and posterior fusion from T10 to the pelvis, with post-op. wound infection). Another post-op decompression occurred in May 2011. On 7/12/11, the claimant was still "sagittally forward" but felt "much improved." Quadriceps and iliopsoas weakness had been previously noted; however, most recently the lower extremity exam was unremarkable except for some ankle dorsiflexion weakness. The claimant was walking with the aid of a walker due to deconditioning and ongoing sagittal imbalance affecting the claimant's activities. Surgical intervention was proposed. On 8/11/11, right-sided S1 radiculopathy and sagittal imbalance were reiterated. In February 2010, low back pain, deconditioning and the lack of having performed adequate post-op PT was noted. The neurologic exam was intact.

Denial letters documented an indication for Physical Therapy in this relatively early post-op period, along with the lack of a detailed history correlating with imaging findings. The 8/11/11 and 7/26/11 dated appeal letters were noted.

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

The claimant has been subjectively improving with regards to his pain and/or tolerance of the reported sagittal imbalance. In addition, the mild subjective complaints and the normal neurological exam and rest of the exam findings (except sagittal imbalance), do not evidence a severity of condition to warrant the major magnitude procedures as proposed. In addition, the claimant has not undergone a comprehensive rehabilitation program (“physical medicine” as per ODG criteria below) prior to the proposed request. Therefore, the proposed procedure is not medically necessary at this time as per ODG fusion guidelines.

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
- 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)**