

SENT VIA EMAIL OR FAX ON
Sep/06/2011

Pure Resolutions Inc.

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NOTICE OF INDEPENDENT REVIEW DECISION

DATE OF REVIEW:

Sep/06/2011

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Outpatient Bilateral Selective Nerve Root Block (SNRB) at L3/4.

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

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

OD Guidelines

1. Cover sheet and working documents
2. Utilization review determination dated 07/20/11, 08/04/11
3. Operative report dated 12/02/10
4. MRI lumbar spine dated 10/06/10
5. Chart note dated 06/29/11, 12/13/10, 11/03/10
6. Request for reconsideration dated 07/27/11

PATIENT CLINICAL HISTORY SUMMARY

The patient is a female whose date of injury is xx/xx/xxxx. On this date the patient heard a loud noise behind her, twisted to protect herself and had the sudden onset of back and bilateral leg pain. The patient is status post 4 prior back surgeries. MRI of the lumbar spine dated 10/06/10 revealed L4-5 and L5-S1 laminectomy and fusion without complication; grade I anterolisthesis of L3 upon L4 with a small protrusion and moderate facet arthropathy resulting in mild central canal stenosis. Note dated 11/03/10 states that the patient underwent previous caudal epidural steroid injection in 2003 which provided 50% relief for about one week. The patient underwent bilateral L3-4 selective nerve root injection on 12/02/10. Note dated 12/13/10 states that the patient's pain decreased from 5 to 3/10. The injection was more beneficial to the low back than the left leg.

The initial request for outpatient bilateral SNRB was non-certified on 07/20/11 noting that there is no clinical evidence of radiculopathy. The denial was upheld on appeal dated

08/04/11 noting that there is no documentation of radiculopathy; the numbness is subjective and not in a dermatomal distribution.

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

Based on the clinical information provided, the request for outpatient bilateral selective nerve root block at L3-4 is not recommended as medically necessary, and the two previous denials are upheld. There is no current, detailed physical examination submitted for review to establish the presence of active lumbar radiculopathy, and the submitted MRI notes only mild central canal stenosis. The patient underwent previous SNRB in December 2010; however, the patient's objective, functional response to this injection including duration of relief is not documented to establish efficacy of treatment and support a repeat block. Given the current clinical data, the request is not indicated as medically necessary.

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

MEDICAL JUDGEMENT, CLINICAL EXPERIENCE AND EXPERTISE IN ACCORDANCE WITH ACCEPTED MEDICAL STANDARDS

ODG-OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES