



Southwestern Forensic  
Associates, Inc.

**REVIEWER'S REPORT**

**DATE OF REVIEW:** 04/18/12

**IRO CASE #:**

**DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:**

Office visit

**DESCRIPTION OF QUALIFICATIONS OF REVIEWER:**

M.D., Board Certified in Anesthesiology by the American Board of Anesthesiology with Certificate of Added Qualifications in Pain Management, in practice of Pain Management full time since 1993

**REVIEW OUTCOME:**

“Upon independent review, I find that the previous adverse determination or determinations should be (check only one):

Upheld (Agree)

Overturned (Disagree)

Partially Overturned (Agree in part/Disagree in part)

Medical necessity is demonstrated for monthly office visits.

**INFORMATION PROVIDED FOR REVIEW:**

1. URA findings, 2/15/12 to 3/14/12
2. Office Notes, 1/24/12 to 2/29/12

**INJURED EMPLOYEE CLINICAL HISTORY (Summary):**

This female sustained injury on xx/xx/xx and underwent an L2 through L5 fusion for persistent low back pain. She is being maintained on medications including the Schedule 2 opiate Percocet.

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

ODG state that patients receiving opiates should be monitored closely and seen frequently. ODG do not specify specific intervals. It is generally accepted that if a

patient is stable on Schedule 3 medications, office visits every three months are reasonable. A patient on Schedule 2 opiates requires more frequent followup. It is the standard of care to monitor a patient monthly on a Schedule 2 opiate. There is a chance for diversion, and it is not advisable to prescribe three months of Schedule 2 opiates at one visit. Schedule 2 prescriptions cannot be refilled. It is reasonable to see the patient monthly.

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

*(Check any of the following that were used in the course of your review.)*

- 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 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.)