

SENT VIA EMAIL OR FAX ON
Feb/21/2012

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NOTICE OF INDEPENDENT REVIEW DECISION

DATE OF REVIEW:

Feb/17/2012

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Excision of Loose Body Right Knee

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

Request for IRO dated 01/31/12

Utilization review determination dated 12/05/11

Utilization review determination dated 11/03/11

Clinic notes dated 09/23/11-11/10/11

MRI right knee dated 08/11/11

PATIENT CLINICAL HISTORY SUMMARY

The claimant is a male who has date of injury of xx/xx/xx. It is reported on date of injury he stepped in hole on pavement falling onto his right knee. It is reported he subsequently developed right knee pain and was seen by another provider. The record includes MRI of right knee dated 08/11/11. This study reported nondisplaced irregular incomplete fracture involving anterior aspect of tibia near tibial plateau with associated subcutaneous hematoma anteriorly which extends approximately 2 cm transverse x 1 cm AP x 4 cm cranial caudal. There is associated reactive bone marrow edema. The ligamentous structures are intact. There is no visualized chondromalacia. The overall impression is nondisplaced incomplete fracture and associated bone contusion involving anterior aspect of tibia near the tibial tubercle. On 09/23/11 the claimant was seen by. The claimant presents with continued pain to right knee and swelling into front of his knee. On examination of right knee there is swelling over patella tendon and tibial tubercle. There is exquisite tenderness to palpation over the tibial tubercle. There is palpable small possible loose body around this region as well. There is palpable hematoma and effusion. He has full extension and is able to flex

beyond 100 degrees. Radiographs of right knee demonstrate no fracture or dislocation. There is small effusion anterior to tibial tubercle region. AP of pelvis reveals no injury to his total hip prosthesis. MRI results were discussed. opined there was no surgical indication at this time. He was offered aspiration of hematoma which the claimant declined. He was provided activity restrictions. The claimant was seen in follow-up on 10/27/11 and reported continued right knee pain. He indicates loose body in right knee is quite painful. The swelling has resolved. He has some continued tenderness to palpation over tibial tubercle especially with small loose body in this region. The claimant subsequently acquiesced to recommendation of removal of loose body.

The initial review was performed by on 11/03/11. non-certified the request noting there is report of loose body in the knee. However, imaging studies have not been provided for review that demonstrate this. He notes there is no evidence of catching, locking, and popping. The knee appears to be stable. He notes the medical records do not demonstrate if this is arthroscopic or open procedure. The medical records do not demonstrate objectively there is a loose body in the knee. He therefore non-certified the request.

A subsequent appeal review was performed by on 12/05/11. non-certified the request noting there is prior determination of non-certification based on same criteria including imaging studies don't demonstrate loose body. Evidence there is catching, locking, popping of right knee and documentation of loose body is causing significant functional deficits is not demonstrated. He notes the claimant has functional deficits as a result, but the record does not contain any imaging studies that identify loose body in right knee. Therefore, he finds the request non-substantiated.

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

The request for excision of loose body of right knee is not supported by the submitted clinical information, and previous utilization review determinations are upheld. The claimant is noted to have sustained injury to right knee as result of slip and fall on date of injury. The claimant has received conservative treatment and subsequently continues to have anterior knee pain due to reported loose body. The submitted imaging studies fail to identify presence of loose body. In absence of independent imaging studies which clearly indicate presence of loose body as primary pain generator, the request would not be medically necessary, and therefore, the prior determinations are upheld.

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

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

[X] ODG-OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES