



Notice of Independent Review Decision - WC

DATE OF REVIEW:

11/01/13

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE

Lumbar Discogram for L3-L4, L4-L5, and L5-S1, as Outpatient

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

Board Certified in 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)

Provide a description of the review outcome that clearly states whether or not medical necessity exists for each of the health care services in dispute.

Lumbar Discogram for L3-L4, L4-L5, and L5-S1, as Outpatient – UPHELD

INFORMATION PROVIDED TO THE IRO FOR REVIEW

- Office/Outpatient Visit, 04/24/13, 05/29/13, 08/27/13
- History and Physical, 06/17/13, 06/27/13
- Mental Health & Behavior Assessment, 08/21/13
- Pre-Authorization First Request, 08/27/13
- Denial Letters, 08/30/13, 09/06/13
- Pre-Authorization Request Appeal, 09/03/13

PATIENT CLINICAL HISTORY [SUMMARY]:

The patient complained of back pain in the lower, left lumbar spine. The pain radiated to the left buttock, left hip, left lateral thigh, left lateral calf, and left foot. She was assessed with bulging lumbar disc. Medications included Tramadol 50 mg. Due to continued pain, a lumbar discogram was recommended.

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

Review of a lumbar discogram at L3-L4, L4-L5, and L5-S1, is not medically necessary. As noted in the prior Peer Reviews, discography is not recommended by Official Disability Guidelines (ODG), as recent studies show discography has been significantly questioned as a preoperative indication for IDET or spinal fusion. With the current information provided, there was not sufficient findings to support discography on an outpatient basis within ODG recommendations, which specifically indicate they do not recommend discography, due to the conclusions of recent high quality studies having significantly questioned the use of discography.

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**