



Specialty Independent Review Organization

Notice of Independent Review Decision

Date notice sent to all parties: 12/19/2013

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

The item in dispute is the prospective medical necessity of Trazodone 100 Mg 1 Tablet PO Q HS #30 Refills 3.

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 Internal Medicine.

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 disagrees with the previous adverse determination regarding the Trazodone 100 Mg 1 Tablet PO Q HS #30 Refills 3.

INFORMATION PROVIDED TO THE IRO FOR REVIEW:

Records were received and reviewed from the following parties:

These records consist of the following (duplicate records are only listed from one source): Records reviewed from Mutual:

Denial Letters – 10/2/13, 10/30/13

Notes – 10/10/12, 11/7/12, 12/10/12, 1/14/13, 2/13/13,
3/13/13, 4/17/13, 5/15/13, 6/26/13, 8/5/13, 9/30/13, 11/18/13

SOAP Notes – 1/16/13, 7/17/13

Office Note – 4/9/13, 7/16/13 10/15/13

RX History by Claim – 7/8/05-11/25/13
Records reviewed:

SOAP Notes – 12/3/08, 4/14/09, 1/18/10, 7/19/10,
1/19/11, 7/18/11
Mini-Mental Status Exam (MMSE) – 3/10/09
Bilateral Upper Extremity NCV & EMG Study Report – 10/9/08
Disability Letter – 3/4/08
Office Notes – 9/12/05, 11/21/05, 12/1/05, 2/13/06, 8/28/06, 11/27/06,
12/11/06, 2/19/07, 3/5/07, 4/10/07, 8/15/07, 9/5/07, 3/4/08
Ergos Evaluation Summary Report – 1/11/06, 2/9/06
Ergos Evaluation Summary Report (FCE) – 11/23/05
Case Manager Meeting – 11/21/05
Long Term EEG Report – 9/3/05
Neurological consultation – 8/16/05

A copy of the ODG was provided by the Carrier or URA for this review.

PATIENT CLINICAL HISTORY [SUMMARY]:

The claimant is a male who suffered a work injury in xx/xxxx. During that injury he had transient loss of consciousness and suffered a linear fracture of the left temporomandibular joint, a temporal bone fracture, air in the third and fourth ventricles, and basilar skull fractures.

He is on analgesics for chronic pain and headaches. He also takes cyclobenzaprine, Cymbalta, and meclizine. Trazodone was prescribed for depression by his neurologist beginning in January 2013.

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

The neurologist appropriately diagnosed severe depression based on an AssessMD Depression score of 101. Trazodone has FDA approval for treatment of depression at a dose of up to 400 mg daily for outpatients. In addition, the claimant has had a positive response to trazodone at the current dose and has tolerated it well. In summary, trazodone 100 mg one tablet at bedtime, 30 with 3 refills is medically necessary.

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)**
 - Physicians' Desk Reference, 2013 edition
- OTHER EVIDENCE BASED, SCIENTIFICALLY VALID, OUTCOME FOCUSED GUIDELINES (PROVIDE A DESCRIPTION)**
 - Product Information: trazodone hcl tablets, trazodone hcl tablets. Apotex, Corp, Weston, FL, 2006.
 - Micromedex