



**Notice of Independent Review Decision - WC**

**DATE OF REVIEW:** 07/14/14

**IRO CASE #:**

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

Outpatient Right Elbow Excision of Bone Fragment  
Triceps Tendon Repair  
Endoscopic Ulnar Nerve Release

**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:**

- Outpatient Right Elbow Excision of Bone Fragment - Upheld
- Triceps Tendon Repair - Upheld
- Endoscopic Ulnar Nerve Release - Upheld

**INFORMATION PROVIDED TO THE IRO FOR REVIEW**

MRI - 06/21/13  
10/09/13  
05/06/14, 05/20/14, 06/24/14  
06/13/14  
05/13/14, 06/16/14  
05/12/14

**PATIENT CLINICAL HISTORY [SUMMARY]:**

The claimant is a male who sustained a work injury on xx/xx/xx when he fell at work. X-rays showed a displaced fragment off the olecranon osseophyte at the posterior elbow. MRI showed partial tear of triceps, edema within the triceps insertion site upon the olecranon process and no ligament pathology. EMG/NCV demonstrating early/mild right cubital tunnel syndrome without denervation. Surgical repair is recommended by the treating physician.

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

This claimant has subjective tenderness over the palpable bony mass at the posterior elbow. The objective factors are good range of motion and good extension strength of elbow without laxity, suggesting that the triceps tendon is functionally intact; the MRI findings are likely tendinosis rather than tear. In regards to the ulnar nerve, there is no obvious atrophy of the thenar, hypothenar or Intrinsic muscles though Tinel's test and Durkan's or compression test is positive at the elbow with mild decrease in grip and pinch strength. The electrodiagnostic testing is not conclusive: it is more suggestive of median nerve dysfunction or carpal tunnel than it is ulnar nerve compression. The ulnar nerve slowing is slight.

The ODG indicates that nonoperative treatment can be used for partial ruptures, indicating that incomplete tears with active elbow extension against resistance are managed nonsurgically and surgical repair is indicated in active persons with complete tears and for incomplete tears with concomitant loss of strength. This individual does not meet the criteria for surgery on the triceps tendon. Based on the evidence, it is not clear that surgical treatment for the claimant's condition, including excision of a bone fragment and repair of the triceps tendon at the right elbow, is medically necessary treatment.

This individual has complaints of chronic elbow pain and numbness with paresthesias in his right hand and a positive subjective response to Tinel compression of the elbow. The testing demonstrated only early/mild right cubital tunnel syndrome without denervation. The ODG Indications for Surgery requires initial conservative treatment, requiring ALL of the following: exercise, activity modification, medications and use of a pad/splint. None of these conservative measures have been documented in the records received for review. Therefore the conditions set forth under the ODG for surgical treatment of this mild condition have not been met. Within a reasonable medical probability the claimant's symptoms will diminish with appropriate treatment and will not require surgical intervention.

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

- MEDICAL JUDGMENT, CLINICAL EXPERIENCE AND EXPERTISE IN ACCORDANCE WITH ACCEPTED MEDICAL STANDARDS**
- ODG - OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES**