

# Applied Assessments LLC

An Independent Review Organization

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## NOTICE OF INDEPENDENT REVIEW DECISION

### DATE NOTICE SENT TO ALL PARTIES:

July 2, 2014

### IRO CASE #:

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

A right RT super orbital, supratrochlear nerve block.

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

Board Certified PM&R

### 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 medical necessity exists for each health care service in dispute.**

### INFORMATION PROVIDED TO THE IRO FOR REVIEW:

#### PATIENT CLINICAL HISTORY [SUMMARY]:

The patient is a male who initially presented with complaints of right eye pain when he fell forward and struck a fence pole. The clinical note dated 03/05/13 indicates the patient continuing with complaints of pain. The patient was identified as having undergone cognitive behavioral interventions in order to develop coping strategies. The clinical note dated 04/07/14 indicates the patient continuing with complaints of right eye pain. The patient stated that he was unable to see well out of the right eye. The patient stated his vision is cloudy. There is an indication the patient has undergone 6 previous surgeries to the cornea at the right eye. The patient stated that each of the surgeries does provide up to 6-8 months of relief of the symptoms. The patient continued with complaints of 4-7/10 pain. There is an indication the patient is utilizing eye medications as well. The clinical note dated 05/08/14 indicates the patient continuing with complaints of constant pain in the eyes. The patient also had complaints of headaches as well as difficulty sleeping secondary to the pain. The patient described the pain as a dull sensation which turns into a burning sensation. The patient also reported bilateral eye and ear pain that was described as a shooting sensation.

The utilization review dated 04/21/14 resulted in a denial as no high quality studies have been published in peer reviewed literature supporting the proposed super orbital and supratrochlear nerve block.

The utilization review dated 05/20/14 resulted in a denial as the patient was identified as

having no significant functional deficits associated with the ongoing right eye pain.

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

The documentation indicates the patient complaining of right eye pain. Despite the ongoing complaints of pain, there does not appear to be any current functional deficits associated with the right eye complaints. Additionally, no high quality studies have been published in peer reviewed literature supporting the safety and efficacy of the use of super orbital and supratrochlear nerve blocks. Given these findings, the request is not indicated. As such, it is the opinion of this reviewer that the request for super orbital and supratrochlear nerve blocks are not recommended as medically necessary.

**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**

**other Evidence based, scientifically valid, outcome focused guidelines (provide a description)**

- 1.) Gray H, Lewis WH. Anatomy of the Human Body: 5e. The Trigeminal Nerve. Bartleby.com. Available at <http://www.bartleby.com/107/200.html>. Accessed October 2, 2011.
- 2.) Alex Macario, MD, MBA; et al. MedScape. Supratrochlear Nerve Block. Apr 4, 2012.