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An Independent Review Organization

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Notice of Independent Review Decision

Case Number:

Date of Notice: 05/26/2015

Review Outcome:

A description of the qualifications for each physician or other health care provider who reviewed the decision:

Orthopedic Surgery

Description of the service or services in dispute:

Reconsideration of Left Knee Arthroscopy, Meniscal Surgery, Chondroplasty

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)

Patient Clinical History (Summary)

The patient is a female who was injured on xx/xx/xx and developed complaints of left sided knee pain. The patient is status post left knee arthroscopy followed by a partial lateral meniscectomy and chondroplasty involving the patella of the right knee as well as a partial lateral meniscectomy at the left knee completed on 10/11/07. The patient reported a good result in the right knee following surgery; however, the patient continued to have pain in the left knee. It is noted the patient had a 2nd procedure on 07/16/13 to include a revision partial lateral meniscectomy along with chondroplasty and microfracture of the lateral femoral condyle. Since that procedure, the patient still had persistent complaints of left knee pain. The patient did attend postoperative physical therapy with no improvement. The patient still continued to have instability with feelings of pain. The updated MRI study of the left knee from 08/14/14 noted postoperative changes consistent with a partial lateral meniscectomy. There still remained diffused grade 3 to grade 4 chondromalacia throughout the lateral compartment with near total absence of the articular cartilage. There was mild degenerative edema involving the posterior weight bearing portion of the lateral femoral condyle. The lateral meniscus noted mucoid degeneration and intrasubstance cystic formation. No focal tear of the ACL was evident. In the medial compartment there was a new complex tear of the anterior horn of the medial meniscus near the notch. There was also grade 3 chondromalacia involving the patella and trochlear groove which had progressed in comparison to the prior studies. The patient was seen on 03/23/15 for continuing complaints of left knee pain and a feeling of instability. On physical examination, there was limited range of motion in the left knee with several degrees of extension loss and flexion limited to 90 degrees. There was continuing tenderness over the lateral joint line as well as positive McMurray's signs. Tenderness was also noted in the medial joint line and there was some discomfort with patella femoral manipulation. There was increased valgus and Q angles noted. No laxity or instability was evident. Radiographs performed in clinic noted some lateral joint line collapse in the left knee on flexion with a greater degree of patella femoral arthropathy.

The proposed left knee arthroscopy to include meniscal surgery and chondroplasty was denied on 04/22/15 as there were limited recommendations in Official Disability Guidelines regarding arthroscopic intervention to manage osteoarthritis. The patient was noted to have a significant extent of chondromalacia within the left knee, particularly at the lateral compartment. The patient also had significant valgus malalignment

documented on physical examination. It was noted that during the peer-to-peer discussion did not feel that osteoarthritis was the patient's primary pain generator and that the goal of surgery was to optimize internal anatomy of the knee followed by a postoperative unloading brace.

The request was denied on 04/15/15 as there were advanced arthritic changes noted within the left knee, particularly at that the lateral compartment where a majority of the patient's pain was localized. Official Disability Guidelines did not support surgical intervention to address symptomatic osteoarthritis.

Analysis and Explanation of the Decision include Clinical Basis, Findings and Conclusions used to support the decision.

The patient has had persistent left knee pain despite multiple surgical procedures to include extensive chondroplasty and microfracture as well as surgical repair of the lateral meniscus. The patient has had persistent complaints of left knee pain primarily to the lateral side with the development of valgus malalignment. Although had previously stated that he did not feel osteoarthritis was the patient's primary pain generator, the patient's physical examination findings as well as imaging results do indicate substantial osteoarthritis in the left knee that would not reasonably improve with arthroscopic surgical intervention. Official Disability Guidelines do not recommend arthroscopic management of osteoarthritis and given that the patient has had poor results from 2 prior surgical interventions and that has been no substantial change on physical examination to warrant a 3rd arthroscopy to include a meniscal repair and chondroplasty, it is this reviewer's opinion that medical necessity in this case has not been established and the prior denials are upheld.

A description and the source of the screening criteria or other clinical basis used to make the decision:

- ACOEM-America College of Occupational and Environmental Medicine um
- knowledgebase AHCPR-Agency for Healthcare Research and Quality Guidelines
- DWC-Division of Workers Compensation Policies and Guidelines
- European Guidelines for Management of Chronic Low Back Pain
- Interqual Criteria
- Medical Judgment, Clinical Experience, and expertise in accordance with accepted medical
- standards Mercy Center Consensus Conference Guidelines
- Milliman Care Guidelines
- ODG-Official Disability Guidelines and Treatment
- Guidelines Pressley Reed, the Medical Disability Advisor
- Texas Guidelines for Chiropractic Quality Assurance and Practice
- Parameters Texas TACADA Guidelines
- TMF Screening Criteria Manual
- Peer Reviewed Nationally Accepted Médical Literature (Provide a description)
- Other evidence based, scientifically valid, outcome focused guidelines (Provide a description)