



MedHealth Review, Inc.

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DATE NOTICE SENT TO ALL PARTIES: 4/4/16

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE

The item in dispute is the prospective medical necessity of a left ankle osteotomy with surgical correction of lesser toe deformities.

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

The reviewer is a Doctor of Osteopathy who is board certified in Orthopedic Surgery. The reviewer has been practicing for greater than 10 years.

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 agrees with the previous adverse determination regarding the prospective medical necessity of a left ankle osteotomy with surgical correction of lesser toe deformities.

PATIENT CLINICAL HISTORY [SUMMARY]:

This case is involving a male who was reportedly injured on XX/XX/XX with a crush injury to the left foot. Reportedly, over time, he has developed toe deformities and pain and has difficulty with shoe wear. records indicate the claimant has an antalgic gait with claw toe deformities of the second through the fourth toes of the left foot with a non-tender bunion deformity. The second and third toes do not touch the floor with standing.

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

ODG in its "Ankle and Foot (Acute and Chronic)" chapter allows for surgery for Hallux Valgus in the presence of clinical symptoms, after the failure of 6 months of conservative management and with specific radiographic parameters. In this

case, there is no clear evidence that there has been an adequate trial of conservative care of at least 6 months to include padding, orthotic devices or shoe insole modifications, corticosteroid injections, taping, footwear changes or debridement of associated hyperkeratotic lesions. In addition, the only imaging reports regarding the left foot reveal normal findings and no radiographic measurements discussed in ODG are documented. office note does indicate that bunion and claw toe deformities are seen on x-ray but specific measurements as required by ODG are not described. The reviewer notes the ODG guidelines are not met for the requested surgical procedures.

ODG Criteria for Surgery for Hallux Valgus

1. Clinical symptoms present;
2. History of conservative management failure (6 months);
3. 18 years of age or older or skeletally mature;
4. Hallux Abductus Angle <25 degree and IM angle < 12 degrees: consider Capsule Tendon Balance (CTB), Exostectomy or Osteotomy;
5. Hallux Abductus Angle >/25 degrees, IM angle </16 degrees: consider procedures in #4 and arthrodesis;
6. Hallux Abductus Angle > 35 degrees and IM angle >16 degrees: consider #5 and resection arthroplasty;

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)
- OTHER EVIDENCE BASED, SCIENTIFICALLY VALID, OUTCOME FOCUSED GUIDELINES (PROVIDE A DESCRIPTION)