

# Parker Healthcare Management Organization, Inc.

3719 N. Beltline Rd Irving, TX 75038  
972.906.0603 972.906.0615 (fax)  
IRO Cert#5301

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**DATE OF REVIEW:** JUNE 27, 2018

**IRO CASE #:** XX

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

Medical necessity of proposed 20 Home Health Licensed Vocational Nurse Services, 20 visits for Q3 Wound Vac Changes related to Lower back injury

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

This case was reviewed by a Medical Doctor licensed by the Texas State Board of Medical Examiners. The reviewer specializes in Internal Medicine, Emergency Medicine and is engaged in the full time practice of medicine.

## **REVIEW OUTCOME**

Upon independent review the reviewer finds that the previous adverse determination/adverse determinations should be:

- ☐ Upheld (Agree)
- XX Overturned (Disagree)
- ☐ Partially Overturned (Agree in part/Disagree in part)

## **PATIENT CLINICAL HISTORY [SUMMARY]:**

The patient sustained a shrapnel injury to XX lower back when a XX. Initial treatment included ligation of a bleeding vessel inside an avulsion wound on the low back. PT notes indicate the patient had almost returned to XX previous level of functioning and was expected to reach that level quickly. The hospital note documents a specific wound treatment plan, including changing of dressing/wound vac three times per week until healed. The notes do not document the presence of anyone else at home that can perform this duty.

## **ANALYSIS AND EXPLANATION OF THE DECISION INCLUDE CLINICAL BASIS, FINDINGS AND CONCLUSIONS USED TO SUPPORT THE DECISION. IF THERE WAS ANY DIVERGENCE FROM DWC'S POLICIES/GUIDELINES OR THE NETWORK'S TREATMENT GUIDELINES, THEN INDICATE BELOW WITH EXPLANATION.**

DECISION: The URA determination is OVERTURNED. The wound care treatment plan for this patient is reasonable and designed to promote healing while minimizing complications and the risk for infection. While the patient is independent in ADLs, it would be quite difficult for XX to manage XX own low back wound. I doubt that XX could adequately perform wound vac/dressing changes in this anatomically inaccessible area. There is no evidence of the presence of another person who could perform this duty. Therefore, medical necessity has been established. The most efficient, safe way to treat this wound is with the proposed three times weekly LVN visit to perform dressing and wound vac changes.

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

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XX MEDICAL JUDGEMENT, CLINICAL EXPERIENCE AND EXPERTISE IN  
ACCORDANCE WITH ACCEPTED MEDICAL STANDARDS

XX ODG- OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES

XX PEER REVIEWED NATIONALLY ACCEPTED MEDICAL LITERATURE (Irion,  
Comprehensive Wound Management, 2<sup>nd</sup> Ed.; Lindholm C, Searle R. Wound  
management for the 21st century: combining effectiveness and efficiency. *Int Wound J.*  
2016 Jul;13 Suppl 2:5-15.)