

**THIS DECISION HAS BEEN APPEALED. THE FOLLOWING IS THE RELATED SOAH DECISION NUMBER:**

**SOAH DOCKET NO. 453-03-1910.M5**

MDR Tracking Number: M5-02-2319-01

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective January 1, 2002 and Commission Rule 133.305 and 133.308 titled Medical Dispute Resolution by Independent Review Organizations, the Medical Review Division (Division) assigned an IRO to conduct a review of the disputed medical necessity issues between the requestor and the respondent.

The Division has reviewed the enclosed IRO decision and determined that **the requestor did not prevail** on the issues of medical necessity. The IRO agrees with the previous determination that the prescription medications (Effexor and Klonopin) rendered were not medically necessary.

Based on review of the disputed issues within the request, the Division has determined that prescription medications (Effexor and Klonopin) fees were the only fees involved in the medical dispute to be resolved. As the treatment, prescription medications (Effexor and Klonopin) were not found to be medically necessary, reimbursement for dates of service from 11/7/01 through 4/12/02 is denied and the Division declines to issue an Order in this dispute.

This Decision is hereby issued this 6<sup>th</sup> day of December 2002.

Carol R. Lawrence  
Medical Dispute Resolution Officer  
Medical Review Division

CRL/crl

November 25, 2002

**REVISED REPORT**

**THIS REVISED REPORT IS SUBMITTED IN ORDER TO CLARIFY THE REVIEWER'S OPINION.**

Re: Medical Dispute Resolution  
MDR #: M5.02.2319.01  
IRO Certificate No.: IRO 5055

Dear

In performing this review, \_\_\_ reviewed relevant medical records, any documents provided by the parties referenced above, and any documentation and written information submitted in support of the dispute.

The independent review was performed by a matched peer with the treating health care provider. This case was reviewed by a physician who is Board Certified in Physical Medicine and Rehabilitation.

Clinical History:

This female claimant was injured on the job on \_\_\_\_. She subsequently developed pain in her left wrist that was diagnosed as a de Quervain's tenosynovitis. Several months later she developed a burning-type pain in the right upper extremity from the wrist through the elbow, into the shoulder and cervical spine. This was diagnosed as a reflex sympathetic dystrophy or a neurogenic neuropathy-type situation. Stellate ganglion blocks did not make the diagnosis, and it is not clear if the stellate ganglion blocks had any effect or were properly completed.

She was started on medications, Effexor and Klonopin, as a treatment protocol for the neuropathic pain. It appears that the temperate use of this medication controlled the symptomatology. Follow-up notes indicated that there was no particular symptomatology when she was on the medications.

Disputed Services:

Prescription of Klonopin and Effexor.

Decision:

The reviewer agrees with the determination of the insurance carrier. The reviewer is of the opinion that the medications in question are not medically necessary in this case.

Rationale for Decision:

The mechanism of injury supports the diagnosis of a de Quervain's tenosynovitis of the left wrist. There is no clinical indication of any causation that would support the diagnosis of reflex sympathetic dystrophy of the right upper extremity. Diagnostically, there was no study that objectified or made the diagnosis of reflex sympathetic dystrophy.

The records reflect a psychogenic need for the continued use of these medication; however, there does not appear to be an appropriate physiologic need. Moreover, it would appear that there

are some socio-economic issues that are being brought into play relative to the decision-making process as to the need for these additional medications.

Additional Comment:

The reviewer does believe that there is a clear psychogenic need for the continued use of these medications. Because the patient has been on these medications for such a protracted period, if they are discontinued, it should be done at a very moderate rate. This may take six to eight weeks.

I am the Secretary and General Counsel of \_\_\_ and I certify that the reviewing healthcare professional in this case has certified to our organization that there are no known conflicts of interest that exist between him and any of the treating physicians or other health care providers or any of the physicians or other health care providers who reviewed this case for determination prior to referral to the Independent Review Organization.

Sincerely,