

April 30, 2003

Re: MDR #: M2-03-0674-01
IRO Certificate No.: 5055

In accordance with the requirement for TWCC to randomly assign cases to IROs, TWCC assigned your case to ___ for an independent review. ___ has performed an independent review of the medical records to determine medical necessity. 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. Your case was reviewed by a physician who is Board Certified in Orthopedic Surgery.

Clinical History:

This 52-year-old woman reported a fall at work on ___, and complained of neck, back and left shoulder pain with subsequent diagnoses of cervical strain and shoulder contusion. Clinical examinations by multiple physicians during the period of 10/07/02 through 01/23/03 have shown no objective evidence of a progressive neurological deficit.

Disputed Services:

Cervical myelogram with post-myelogram CT scan.

Decision:

The reviewer agrees with the determination of the insurance carrier. The reviewer is of the opinion that a cervical myelogram with post-myelogram CT scan is not medically necessary in this case.

Rationale for Decision:

1. Multiple exams, including those consultants, reveal no compelling findings to support an anatomical radicular nerve deficit.
2. Neurological consultation on 11/12/02 revealed normal left upper extremity studies.
3. MRI 11/15/02 is described by the radiologist as showing a small central disc herniation at C4-5 without lateralization; the same study is described by the requesting physician as "minor herniations" in his 12/18/02 note, and he recommends physical therapy and trigger point injections.
4. Disability evaluation on 01/23/03 suggests no significant physical disability, and there are no recommendations for further medical or alternative medical treatments, no need for further diagnostic tests, and no need for work restrictions related to her neck complaint.

5. There is no suggestion of a surgical disc lesion in the neck, and no support for surgical intervention at this time.

I am the Secretary and General Counsel of ___ and I certify that the reviewing physician 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 care for determination prior to referral to the Independent Review Organization.

We are simultaneously forwarding copies of this report to the payor and the Texas Workers' Compensation Commission. This decision by ___ is deemed to be a Commission decision and order.

YOUR RIGHT TO REQUEST A HEARING

Either party to this medical dispute may disagree with all or part of this decision and has a right to request a hearing.

If disputing a spinal surgery prospective decision a request for a hearing must be in writing and it must be received by the TWCC Chief Clerk of Proceedings **within ten (10) days** of your receipt of this decision (28 Tex. Admin. Code 142.5©).

If disputing other prospective medical necessity (preauthorization) decisions a request for a hearing must be in writing and it must be received by the TWCC Chief Clerk of Proceedings **within twenty (20) days** of your receipt of this decision (28 Tex. Admin. Code 148.3).

This Decision is deemed received by you **five (5) days** after it was mailed (28 Tex. Admin. Code 102.4(h) or 102.5 (d)). A request for a hearing should be sent to:

Chief Clerk of Proceedings
Texas Workers' Compensation Commission
P.O. Box 40669
Austin, TX 78704-0012

A copy of this decision should be attached to the request. The party appealing the decision shall deliver a copy of its written request for a hearing to all other parties involved in the dispute.

I hereby verify that a copy of this Independent Review Organization (IRO) Decision was sent to the carrier, the requestor and claimant via facsimile or U.S. Postal Service from the office of the IRO on April 30, 2003

Sincerely,