

## NOTICE OF INDEPENDENT REVIEW DETERMINATION

MDR Tracking Number: M2-04-0940-01

March 23, 2004  
IRO Certificate# 5259

An independent review of the above-referenced case has been completed by a medical physician board certified in family practice. The appropriateness of setting and medical necessity of proposed or rendered services is determined by the application of medical screening criteria published by \_\_\_ or by the application of medical screening criteria and protocols formally established by practicing physicians. All available clinical information, the medical necessity guidelines and the special circumstances of said case was considered in making the determination.

The independent review determination and reasons for the determination, including the clinical basis for the determination, is as follows:

See Attached Physician Determination

\_\_\_ hereby certifies that the reviewing physician is on Texas Workers' Compensation Commission Approved Doctor List (ADL). Additionally, said physician has certified that no known conflicts of interest exist between him and any of the treating physicians or providers or any of the physicians or providers who reviewed the case for determination prior to referral to \_\_\_.

### CLINICAL HISTORY

\_\_\_ sustained a work related back injury on \_\_\_. She was diagnosed on 10/16/01 with lumbar and lower extremity pain and treated with medications. She had epidural steroid injections as well. Electrodiagnostic studies on 11/11/01 were normal. She had emergency back surgery on 2/20/03 after developing cauda equina syndrome. An impairment rating on 10/03/03 of 40% was adjusted to 60% on 11/27/03 due to neurogenic bladder after surgery. A prescription for a muscle stimulator was dated 9/24/03. Clinical records submitted notes exacerbation of pain on 12/19/03 and 1/30/04.

### REQUESTED SERVICE (S)

Purchase an interferential muscle stimulator.

### DECISION

Denied.

### RATIONALE/BASIS FOR DECISION

This patient had a very unfortunate course with regard to her back injury and surgery. However, a muscle stimulator is generally used as an adjunctive treatment in the acute phase of therapy. This view is supported by CMS and NASS guidelines and the Philadelphia Panel study. No accepted, peer-review literature supports the use of this type of device for chronic pain or post surgically. Moreover, the submitted records do not show any objective evidence in an improvement in function or work status or a decrease in medication, treatment modalities, or pain.

Therefore, the request to purchase this device is denied.

#### YOUR RIGHT TO REQUEST A HEARING

Either party to this medical dispute may disagree with all or part of the 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 **10** (ten) calendar days of your receipt of this decision (20 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 **20** (twenty) calendar days of your receipt of this decision (28 Tex. Admin. Code 148.3)

This decision is deemed received by you 5 (five) days after it was mailed or the date of fax (28 Tex. Admin. Code 102.4(h) or 102.5(d)). A request for a hearing and a **copy of this decision** must be sent to:

Chief Clerk of Proceedings/Appeals Clerk  
Texas Workers' Compensation Commission  
P.O. Box 17787  
Austin, Texas 78744

Or fax the request to (512) 804-4011. A copy of this decision must be attached to the request.

The party appealing the decision shall deliver a copy of its written request for a hearing to the opposing party involved in the dispute.

In accordance with Commission Rule 102.4(h), 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 this 24<sup>th</sup> day of March 2004.