

June 2, 2004

MDR #: M2-04-1308-01  
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.

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.

Information and medical records pertinent to this medical dispute were requested from the Requestor and every named provider of care, as well as from the Respondent. 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 Anesthesiology and Pain Management and is currently listed on the TWCC Approved Doctor List.

## REVIEWER'S REPORT

### **Information Provided for Review:**

TWCC-60, Table of Disputed Services, EOB's

Information from Requestor: office notes and physical therapy notes.

Information from Respondent: correspondence and designated doctor report.

Information from Treating Doctor: office notes.

### **Clinical History:**

This patient's diagnoses are fibromyalgia, myofascial pain syndrome, carpal tunnel syndrome, and shoulder impingement resulting from a work-related injury on \_\_\_\_.

### **Disputed Services:**

Purchase of an R54i sequential stimulator 4-channel combination interferential & muscle stimulator unit

### **Decision:**

The reviewer agrees with the determination of the insurance carrier and is of the opinion that the muscle stimulator in dispute as stated above is not medically necessary in this case.

**Rationale:**

The office notes supplied were for 04/27, 03/03, 02/10, 02/05, 01/05/2004 and 11/18/2003. In the oldest note, that of 11/18/03, there was mention of the stimulator when it was ordered. However, there was lack of appropriate clinical data concerning patient outcomes after utilizing the device from 11/21/03 to 11/30/03. It could not be determined if the patient benefited from the device.

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, MS-48  
751 Metro Center Dr., Ste. 100  
Austin, TX 78744-1609

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 June 2, 2004.