

# MEDICAL REVIEW OF TEXAS

[IRO #5259]

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Austin, Texas 78738

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## NOTICE OF INDEPENDENT REVIEW DETERMINATION

TWCC Case Number:	
MDR Tracking Number:	M2-05-1479-01
Name of Patient:	
Name of URA/Payer:	Houston ISD
Name of Provider: (ER, Hospital, or Other Facility)	
Name of Physician:	Arnold Valenson, MD
(Treating or Requesting)	

May 31, 2005

An independent review of the above-referenced case has been completed by a medical physician board certified in orthopedic surgery. The appropriateness of setting and medical necessity of proposed or rendered services is determined by the application of medical screening criteria published by Texas Medical Foundation, 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

Medical Review of Texas (MRT) 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 MRT.

Sincerely,

Michael S. Lifshen, MD  
Medical Director

cc: Arnold Valenson, MD  
Texas Workers Compensation Commission

#### CLINICAL HISTORY

This patient is a 31-year-old electrician who struck his right knee on a dash getting into his truck on \_\_\_\_\_. X-rays of the knee were negative. After an initial evaluation by his primary care physician, Joseph Ropsth, MD, he was referred to an orthopedist, Arnold Valenson, MD.

A right knee MRI was obtained on 11/1/04 that showed prepatellar subcutaneous tissue edema and supra-patella bursal swelling. A bone scan obtained 11/22/04 showed multiple areas of mild increased uptake including increased uptake in both patellae.

Dr. Valenson has requested surgical evaluation of a possible subchondral fracture of the patella. A required medical examination was performed by David G. Vanderweide, MD on 1/7/05. At that time Dr. Vanderweide stated that the patient's only complain was mild discomfort with kneeling or prolonged sitting. HE had no pain with weight bearing and was working regular duty. He recommended a course of physical therapy and anti-inflammatory medications.

Dr. Valenson describes the patient's symptoms as much more significant than did Dr. Vanderweide. On 11/29/04 Dr. Valenson states that the patient was complaining of "locking sensations, clicking, popping and some cracking sensations." On 1/24/05 Dr. Valenson states that the patient was complaining of "poking, pinching and burning sensation" with range of motion. Physical therapy was instituted upon that date.

On 10/9/04 Dr. Valenson states that the patient was complaining of stabbing pain in the area of his patella that was sometimes excruciating. Dr. Valenson states that the patient had been treated with anti-inflammatory medications and physical therapy and was not responding to these treatments.

REQUESTED SERVICE(S)

Right knee arthroscopy, possible arthrotomy.

DECISION

Approve right knee arthroscopy.

Deny arthrotomy.

RATIONALE/BASIS FOR DECISION

The patient has no objective findings on physical examination or radiographic evaluation that mandate knee arthroscopy. His MRI did not show intra-articular pathology. Although his bone scan did show increased uptake in the patella, this was a bilateral finding.

The indication for arthroscopy is ongoing, **significant** anterior knee pain, which has not responded to conservative treatment. Dr. Valenson is correct that it is possible that a chondral injury to the patella could have occurred by this patient's mechanism of injury and could have been missed by MRI and bone scan imaging modalities. If the patient truly has the severe symptoms that Dr. Valenson describes, and not the milder symptoms reported by Dr. Vanderweide, and these symptoms have not responded to conservative treatment, it would be appropriate to perform an arthroscopic evaluation of the knee. A chondral injury to the patella, if found, could be managed arthroscopically. It is unclear from the medical records what pathology Dr. Valenson thinks may be present that would warrant a right knee arthrotomy.

## 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 1<sup>st</sup> day of June 2005.

Signature of IRO Employee: \_\_\_\_\_

Printed Name of IRO Employee: Cindy Mitchell