



Specialty Independent Review Organization, Inc.

May 20, 2005

TWCC Medical Dispute Resolution  
7551 Metro Center Suite 100  
Austin, TX 78744

Patient:  
TWCC #:  
MDR Tracking #: M2-05-1609-01  
IRO #: 5284

Specialty IRO has been certified by the Texas Department of Insurance as an Independent Review Organization. The Texas Worker's Compensation Commission has assigned this case to Specialty IRO for independent review in accordance with TWCC Rule 133.308, which allows for medical dispute resolution by an IRO.

Specialty IRO has performed an independent review of the proposed care to determine if the adverse determination was appropriate. In performing this review, all relevant medical records and documentation utilized to make the adverse determination, along with any documentation and written information submitted, was reviewed.

This case was reviewed by a licensed Medical Doctor with a specialty in Anesthesia and Pain Management. The reviewer is on the TWCC ADL. The Specialty IRO health care professional has signed a certification statement stating that no known conflicts of interest exist between the reviewer and any of the treating doctors or providers or any of the doctors or providers who reviewed the case for a determination prior to the referral to Specialty IRO for independent review. In addition, the reviewer has certified that the review was performed without bias for or against any party to the dispute.

#### CLINICAL HISTORY

According to the medical records, the patient was working for the and was involved in a work-related motor vehicle accident. The patient was driving a work vehicle at 8-10 miles per hour spreading chemicals and was struck from the rear by a large passenger vehicle traveling at 60 mph. The patient was then treated at Rio Grande Regional Hospital and was hospitalized for five days during which time he underwent multiple diagnostics. The patient presented pain in the following areas: neck, left shoulder, left arm, left elbow, thoracic, lumbar and left knee. The patient was initially seen by Dr. Beck, Dr. Seas, and Dr. Schroeder and was sent for physical therapy with Dr. Siragusa, DC. The patient initiated with

passive modalities of physical therapy on 11-04-03. The patient referred headaches in addition to other mentioned symptoms. The patient again saw Dr. Beck, neurosurgeon, and he underwent cervical MRI due to persistent complaints. He was also evaluated for eye pathology but was diagnosed with post concussion headache.

The patient underwent left knee arthroscopy on 02-06-04 and had significant improvement. He continued with post-operative physical therapy and continued with complaints of neck, shoulder and low back pain. Physical therapy treatment summaries from the Neuromuscular Institute of Texas indicated slight improvement with the cervical ROM but knee and shoulder presented significant improvement. The patient continued to refer occipital pain along with cervical pain, which increased with rotation and extension. A behavioral assessment of 08-04-04 by South Texas Pain & Rehabilitation Medicine reported some psychological overlay despite conservative treatment. However at this stage, the patient had not undergone his cervical, shoulder or wrist interventions.

Dr. Rashid saw the patient on 07-13-04. The patient continued to refer cervical, lumbar and left shoulder pain at an intensity of 8/10. His physical examination revealed pain in the cervical paravertebral and trapezius areas with ranges of motion to rotation and extension limited. Lumbar spine also presented findings not relevant to this evaluation. Left shoulder also has important limitation to abduction. He placed the patient on new medications and recommended cervical and lumbar facet blocks as well as intra-articular injection to the shoulder.

Dr. Rashid performed the left cervical medial branch block at C3-C6 on 08-11-04 and the right cervical medial branch block at C3-C6 on 08-18-04. The patient referred VAS of 4/10 after right cervical medial branch block on 08-18-04, but also had concomitant left shoulder arthroscopy. He then recommended RFL of the same cervical levels. The patient referred a "good" result after the initial blocks. Dr. Rashid performed the repeat right cervical medial branch block at C3-C6 on 03-24-05 and the left cervical medial branch block at C3-C6 on 04-04-05. His post office note still reports a VAS score of 8/10 several weeks post procedure. The patient referred however full relief of cervical pain for at least three days. The radiofrequency procedure was requested again.

The patient later underwent left carpal release in November of 2004 with good results. In terms of diagnostics, the results of multiple imaging studies were available for review. EMG/NCV of upper extremities of 01-19-04 was negative for cervical radiculopathy and positive for left median neuropathy. Cervical MRI of 11-26-03 reported significant osteophytes at C5-C7 more towards the left with disc bulge at C5-C6. There is no mention of facet arthropathy. Cervical MRI of 10-21-03 reported disc pathology at C5-C7 with no mention of osteophytes or facet pathology. Cervical spine MRI of 08-27-04 reported multilevel spondylosis, osteophytes at C6-C7 with disc involvement and facet arthrosis more at C5-C6 and C3-C4 on the right.

## DOCUMENTS REVIEWED

### A. General Records

- Notification of IRO Assignment dated 04-28-05
- Receipt of MDR Request dated 04-28-05
- MDR Request dated 10-05-04
- Initial Pre-authorization denial dated 09-11-04
- Appeal pre-authorization denial dated 09-29-04

### Records from the carrier

- TWCC 73 forms dated: 10-20-03, 11-04-03, 11-05-03, 11-25-03, 11-24-03, 12-09-03, 12-23-03, 01-06-04, 01-21-04, 01-27-04, 02-11-04, 03-11-04, 04-15-04, 04-19-04, 04-30-04, 05-27-04, 06-16-04, 07-16-04, 08-18-04, 08-31-04
- Letter of payment for MDR dated 05-03-05
- Voucher request form dated 04-29-05
- First report of injury dated
- Operative note of 02-06-04 for left arthroscopy by Dr. Mitchell
- Operative note of 08-11-04 for left cervical medial branch block at C3, C4, C5 and C6 by Dr. Rashid
- Operative note of 08-18-04 for right cervical medial branch block at C3, C4, C5 and C6 by Dr. Rashid
- Operative report of 08-20-04 for left shoulder arthroscopy by Dr. Marquez
- ER record notes dated 10-20-03
- Rio Grande Regional Hospital Record dated 11-26-03 and 12-01-03
- EMG/NCV study dated 01-19-04
- Cervical spine x-ray dated 10-20-03
- Lumbar spine x-ray dated 10-20-03
- CT scan of cervical without contrast dated 10-20-03
- Left shoulder x-ray dated 10-21-03
- Cervical MRI without contrast dated 10-21-03
- MRI of left knee dated 11-13-03
- MRI of the left shoulder dated 11-11-03
- Cranial MRI and Orbital MRI dated 11-26-03
- MRI of cervical spine dated 11-26-03
- MRI of the lumbar spine dated 06-29-04
- MRI of cervical spine dated 08-27-04
- FCE testing dated 12-19-03 and 07-07-04
- RIO Grande Valley daily evaluations dated: 01-26-04, 08-23-04, 08-25-04, 08-30-04, 09-01-04, 09-02-04, 09-09-04, 09-10-04
- Daily physical therapy progress notes: 11-05-03, 11-06-03, 11-10-03, 11-11-03, 11-13-03, 11-18-03, 11-20-03, 12-02-03, 10-04-03, 12-08-03, 12-09-03, 12-10-03, 12-11-03, 12-16-03, 12-17-03, 12-19-03, 12-31-03, 01-02-04, 01-07-04, 01-08-04, 01-12-04, 01-16-04, 01-19-04, 01-21-04, 01-23-04, 01-29-04, 03-02-04,

- 03-04-04, 03-05-04, 03-09-04, 03-10-04, 03-11-04, 03-15-04, 03-26-04, 03-23-04, 03-29-04, 03-31-04, 04-02-04, 04-05-04, 04-13-04, 04-16-04, 04-16-04, 04-20-04, 04-22-04, 04-07-04, 06-03-04, 06-16-04, 06-28-04, 07-06-04, 07-09-04, 07-12-04, 07-14-04, 07-19-04, 07-28-04, 07-29-04-, 08-11-04, 08-16-04, 08-19-04, 06-02-04, 03-18-04
- Office notes from Dr. Raul Marquez, orthopedics, dated: 07-16-04, 08-31-04 and 09-01-04
- IME from Dr. Robert Whitsell dated 10-01-04
- Office notes from Dr. Daniel Buentello, DC dated 01-29-04, 08-18-04
- Evaluation by Dr. Mitchell, orthopedics, dated 11-05-03
- Designated Doctor evaluation by Dr. Darshan Gill dated 06-03-04
- Peer review dated 03-26-04 by Dr. William Dossman
- Office notes from Dr. Rashid, pain mgmt, dated 07-13-04, 08-10-04
- Office notes from Dr. Beck, neurosurgery, dated 11-26-03, 12-24-03, 01-06-04, 01-09-04, 01-27-04, 02-11-04, 02-11-04, 02-25-04, 03-11-04, 04-15-04, 05-11-04, 05-27-04, 06-01-04, 10-24-03
- Pre-authorization denial for EMG/NCV dated 07-16-04
- Pre-authorization approval for cervical medial branch blocks dated 07-26-04
- Pre-authorization denial for EMG/NCV dated 08-02-04
- Pre-authorization denial for bilateral cervical radio frequency dated 09-11-04
- Reconsideration denial for bilateral cervical radio frequency dated 09-29-04

A. Records from the doctor

- TWCC IRO Assignment dated 04-28-05
- Receipt of MDR Request dated 04-28-05
- TWCC 73 forms dated: 04-14-05, 02-28-05, 12-23-04, 08-19-04, 06-16-04, 01-21-04, 11-04-03, 04-19-04,
- EMG / NCV dated 01-19-04
- Cervical MRI dated 11-26-03 (with contrast)
- Cervical MRI dated 10-21-03 (without contrast)
- Cervical spine x-ray dated 10-20-03
- Cervical spine x-ray dated 10-20-03
- Lumbar spine x-ray dated 10-20-03
- CT scan of cervical without contrast dated 10-20-03
- Left shoulder x-ray dated 10-21-03
- Cervical MRI without contrast dated 10-21-03
- MRI of left knee dated 11-13-03
- MRI of the left shoulder dated 11-11-03
- MRI of the lumbar spine dated 06-29-04
- MRI of cervical spine dated 08-27-04
- Operative note for left cervical medial branch block C3, C4, C5, C6 dated 08-11-04 by Dr. Rashid

- Operative note for right cervical medial branch block C3, C4, C5, C6 dated 08-18-04 by Dr. Rashid
- Operative note for right cervical medial branch block C3, C4, C5, C6 dated 03-24-05 by Dr. Rashid
- Operative note for left cervical medial branch block C3, C4, C5, C6 dated 04-04-05 by Dr. Rashid
- Operative report of 08-20-04 for left shoulder arthroscopy by Dr. R. Marquez
- Operative report of 12-01-04 by Dr. R. Marquez for left carpal tunnel release
- Occupational Therapy Evaluation by NIT dated 01-26-04 and 02-16-04
- DME Evaluation dated 11-15-04
- Daily progress notes dated: 04-22-04, 04-20-04, 04-16-04, 04-13-04, 04-08-04, 04-07-04, 04-05-04, 04-02-04, 03-31-04, 03-29-04, 03-26-04, 03-23-04, 05-27-04, 05-25-04, 05-20-04, 05-19-04, 05-17-04, 05-13-04, 05-12-04, 05-10-04, 05-06-04, 05-03-04, 04-29-04, 04-27-04, 03-15-04, 03-11-04, 03-10-04, 03-09-04, 03-05-04, 03-04-04, 03-02-04, 02-26-04, 02-24-04, 02-23-04, 02-17-04, 02-03-04, 01-29-04, 11-02-04, 10-28-04, 10-26-04, 10-21-04, 10-20-04, 10-18-04, 10-14-04, 10-13-04, 10-11-04, 10-07-04, 10-06-04, 10-04-04, 01-05-05, 11-30-04, 07-23-04, 11-22-04, 11-18-04, 11-07-04, 11-12-04, 11-10-04, 11-09-04, 02-15-05, 02-09-05, 01-13-05, 01-12-05, 01-11-05, 01-06-04, 01-05-05, 01-03-05, 12-23-04, 12-22-04, 12-20-04, 12-16-04, 12-15-04, 12-13-04, 12-08-04, 11-22-04, 11-18-04, 11-10-04, 10-26-04, 10-21-04, 10-14-04, 10-01-04, 09-30-04, 09-29-04, 09-28-04, 09-22-04, 09-16-04, 09-15-04, 09-13-04, 09-10-04, 09-09-04, 09-07-04, 09-02-04, 09-01-04, 08-30-04, 08-25-04, 08-23-04, 08-23-04, 08-19-04, 08-16-04, 08-11-04, 07-29-04, 07-28-04, 07-19-04, 07-14-04, 07-12-04, 07-09-04, 07-06-04, 06-28-04, 06-21-04, 06-16-04, 06-03-04, 05-27-04, 04-16-04, 03-31-04, 02-26-04, 01-29-04, 01-23-04, 01-21-04, 01-19-04, 01-16-04, 01-12-04, 01-08-04, 01-07-04, 01-06-04, 01-02-04, 12-31-03, 12-19-03, 12-17-03, 12-16-03, 12-1-03, 12-10-03, 12-09-03, 12-08-03, 12-04-03, 12-02-03, 11-25-04, 11-20-03, 11-18-03, 11-17-03, 11-13-03, 11-11-03, 11-10-03, 11-06-03, 11-05-03, 02-14-05, 02-07-05, 02-03-05, 02-02-05, 01-31-05, 01-27-05, 01-26-05, 01-24-05, 01-21-05, 01-19-05
- NIT Treatment Summary dated: 03-18-04, 04-26-04, 06-02-04, 11-03-04, 09-29-04
- Work Hardening daily progress notes dated: 04-22-05, 04-21-05, 04-20-05, 04-19-05, 04-18-05, 04-14-05, 04-13-05, 04-12-05, 04-11-05, 04-08-05, 04-07-05, 04-06-05, 04-05-05, 04-01-05, 03-31-05, 03-30-05, 03-29-05, 03-28-05, 03-21-05, 03-22-05, 03-17-05, 03-16-05, 03-14-05
- FCE evaluations dated: 12-19-03, 07-07-04, 02-23-05
- Behavioral Assessment dated 08-04-04
- Office notes from Dr. S. Rashid dated: 03-18-05, 03-15-05, 01-05-05, 01-04-05, 12-07-04, 12-10-04, 11-02-04, 10-22-04, 09-03-04, 08-10-04, 08-31-04, 08-17-04, 08-10-04, 07-16-04, 07-13-04,
- Office note from Dr. Gustavo Ramos dated 12-15-04

- Office notes from Dr. R. Marquez, orthopedics, dated: 12-14-04, 10-20-04, 10-12-04, 09-21-04, 08-31-04, 07-16-04,
- Rio Grande Hospital consult with Dr. Mohamed Beck dated 10-24-03
- IME with Dr. Robert Whitsell dated 10-01-04
- Office notes from Dr. D. Buentello, DC dated: 01-13-05, 12-08-04, 10-01-04, 09-01-04, 08-18-04, 06-21-04, 11-04-03, 03-04-05

### REQUESTED SERVICE

The requested service is a bilateral cervical radiofrequency ablation.

### DECISION

The reviewer disagrees with the previous adverse determination.

### BASIS FOR THE DECISION

The reviewer indicates that according to medical literature, cervical facet joint injections can be useful from a diagnostic standpoint in patients that presents clinical findings of posterior element pain as well as having failed conservative measures of treatment. After reviewing his medical history, his mechanism of injury could certainly have generated cervical facet injury and a source of persistent pain. Since MRI studies are not conclusive as to the role of facet pathology and pain generation, these medial branch blocks, both initial and confirmatory are essential to establish a diagnosis. This request was previously reviewed before the repeat diagnostic blocks had been performed. Obviously, this was the main rationale for the previous pre-authorization denials. The standards of practice in this procedure indicate that a second set of diagnostic medial branch blocks are in order before proceeding with radio frequency thermal coagulation to rule out a false positive response.

This patient underwent initial medial branch blocks with 100% relief for at least three days but improved range of motion and participation in activities of daily living. However, this response is masked by his left shoulder arthroscopy, which occurred during the same time frame. He then underwent a repeat diagnostic block more than 6 months later, which presented significant relief as well. Given his mechanism of injury, his symptomatic complaints as well as his consistent physical limitations of cervical facet pain, the reviewer feels that his diagnosis of cervical facet mediated pain has been established at these tested levels. This having been said, the documentation provided has been thorough except in one regard: there is no differentiation of response to the left sided medial branch blocks and the right-sided blocks. Nonetheless, given his mechanism of injury and persistent complaints, the reviewer feels that it is reasonable to establish a bilateral diagnosis. In addition, the patient does present with additional pathologies of osteophytes and disc changes which also contribute to his pain generation, but radiculopathy is not a contributing factor.

The reviewer states it is important to note that radiofrequency ablation will provide therapeutic benefit for a prolonged period of time. In certain occasions, this procedure can be repeated after a prolonged period of time. In order for this to be considered in the future, specific documentation as to percentage and duration of relief must be presented.

#### REFERENCES

- (1) ISIS Practice Guidelines and Protocols. 2004.
- (2) Bogduk, N. *Diagnostic Nerve Blocks in Chronic Pain*. Best Pract Res Clin Anaesthesiol. 2002 Dec; 16(4), 565-78.
- (3) Pappas, John L., Cynthia H. Kahn and Carol Warfield. *Facet Block and Neurolysis. Interventional Pain Management*. 1996. pp 284-303.

Specialty IRO has performed an independent review solely to determine the medical necessity of the health services that are the subject of the review. Specialty IRO has made no determinations regarding benefits available under the injured employee's policy. Specialty IRO believes it has made a reasonable attempt to obtain all medical records for this review and afforded the requestor, respondent and treating doctor an opportunity to provide additional information in a convenient and timely manner.

As an officer of Specialty IRO, Inc, dba Specialty IRO, I certify that there is no known conflict between the reviewer, Specialty IRO and/or any officer/employee of the IRO with any person or entity that is a party to the dispute.

Sincerely,

Wendy Perelli, CEO

#### **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.

In the case of prospective ***spinal surgery*** decision, a request for a hearing must be made in writing and it must be received by the TWCC Chief Clerk of Proceedings within **10** days of your receipt of this decision. (20 Tex. Admin. Code 142.5(c)).

In the case of other ***prospective (preauthorization) medical necessity*** disputes a request for a hearing must be in writing, and it must be received by the TWCC Chief Clerk of Proceedings within **20** (twenty) 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 (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 Worker's Compensation Commission, P.O. Box 17787, Austin, TX 78744. The fax number is 512-804-4011. A copy of this decision should be attached to the request.

The party appealing this decision shall deliver a copy of its written request for a hearing to all other parties involved in the dispute, per TWCC rule 133.308(u)(2).

Sincerely,

Wendy Perelli, CEO

**I hereby certify, in accordance with TWCC Rule 102.4 (h), that a copy of this Independent Review Organization decision was sent to the carrier, requestor, claimant (and/or the claimant's representative) and the TWCC via facsimile, U.S. Postal Service or both on this 20<sup>th</sup> day of May 2005**

**Signature of Specialty IRO Representative:**

**Name of Specialty IRO Representative:      Wendy Perelli**