



SENT TO: Texas Department of Insurance  
Health & Workers' Compensation Network Certification & QA  
Division (HWCN) MC 103-5A  
512.804.4868

—  
Harris & Harris  
Robert Josey  
512.346.2539

Robert Urrea, MD  
915.881.8082

February 5, 2007

RE: IRO Case #: M2-07-0724  
Name: —  
Coverage Type: Workers' Compensation Health Care - Non- network  
Type of Review:  
     Preauthorization  
     Concurrent Review  
     Retrospective Review  
Prevailing Party:  
     Requestor  
     Carrier

ZRC Medical Resolutions, Inc. (ZRC) has been certified, IRO Certificate #5340, by the Texas Department of Insurance (TDI) as an Independent Review Organization (IRO). TDI has assigned this case to ZRC for independent review in accordance with the Texas Insurance Code, the Texas Labor Code and applicable regulations.

ZRC has performed an independent review of the proposed/rendered care to determine if the adverse determination was appropriate. In the performance of the review, ZRC reviewed the medical records and documentation provided to ZRC by involved parties.



This case was reviewed by an M.D., F.A.C.S., Board Certification: American Board of Orthopedic Surgery. The reviewer has signed a certification statement stating that no known conflicts of interest exist between the reviewer and the injured employee, the injured employee's employer, the injured employee's insurance carrier, the utilization review agent (URA), and any of the treating doctors or other health care providers who provided care to the injured employee, or the URA or insurance carrier health care providers who reviewed the case for a decision regarding medical necessity before referral to the IRO. In addition, the reviewer has certified that the review was performed without bias for or against any party to the dispute.

As an officer of ZRC, I certify that:

1. there is no known conflict between the reviewer, ZRC and/or any officer/employee of ZRC with any person or entity that is a party to the dispute, and
2. a copy of this IRO decision was sent to all of the parties via U.S. Postal service or otherwise transmitted in the manner indicated above on February 5, 2007.

RIGHT TO APPEAL:

You have the right to appeal the decision by seeking judicial review. This IRO decision is binding during the appeal process.

For disputes other than those related to prospective or concurrent review of spinal surgery, the appeal must be filed:

1. directly with a district court in Travis County (see Labor Code 413.031(m)), and
2. within thirty (30) days after the date on which the decision is received by the appealing party.

For disputes related to prospective or concurrent review of spinal surgery, you may appeal the IRO decision by requesting a Contested Case Hearing (CCH). A request for CCH must be in writing and received by the Division of the Workers' Compensation, Division Chief Clerk, within ten (10) days of your receipt of this decision.

Sincerely,

A stylized signature consisting of the lowercase letters "j" and "c" in a bold, sans-serif font. The "j" has a dot above it, and the "c" is positioned to the right of the "j".

Jeff Cunningham, D.C.  
President/CEO



**REVIEWER REPORT**  
**M2-07-0724-01**

**DATE OF REVIEW:** 02/05/07

**IRO CASE #:** M2-07-0724-01

**DESCRIPTION OF THE SERVICE OF SERVICES IN DISPUTE:**  
Cervical discogram requested for preauthorization.

**DESCRIPTION OF QUALIFICATIONS OF REVIEWER:**  
M.D., F.A.C.S., Board Certification: American Board of Orthopedic Surgery

**REVIEW OUTCOME:**

“Upon independent review, I find that the previous adverse determination or determinations should be (check only one):

Upheld (Agree)

Overturned (Disagree)

Partially Overturned (Agree in part/Disagree in part)

**INFORMATION PROVIDED FOR REVIEW:**

The medical records maintained by M.D. between 08/31/06 and 12/29/06.

**INJURED EMPLOYEE CLINICAL HISTORY (Summary):**

This now 33-year-old man was apparently lifting or in some other way trying to control an person suffering a seizure on \_\_\_\_\_. He suffered the onset of cervical and left-sided paracervical, trapezius, parascapular, and shoulder pain. He has been treated with physical therapy and evaluated by history and physical examination and MRI scan.

**ANALYSIS AND EXPLANATION OF THE DECISION, INCLUDING CLINICAL BASIS, FINDINGS AND CONCLUSIONS USED TO SUPPORT DECISION:**

I find no objective physical findings that would indicate that this patient is suffering even degenerative disc disease. The history and physical findings are suggestive of cervical strain syndrome, trapezius myositis, cervicgia and other nonspecific soft tissue pathologies. There are no physical findings or special studies to suggest degenerative disc disease or herniated nucleus pulposus in the cervical region.

A discogram is a nonspecific, insensitive study, which has limited value. It is somewhat controversial, and by some is felt to be of benefit when a surgical procedure is contemplated to be sure that no potential pain generators are left out of the surgical procedure. Otherwise, I see nothing that would suggest that a cervical discogram would be of any diagnostic or therapeutic benefit for this patient.

**DESCRIPTION AND SOURCE OF THE SCREENING CRITERIA OR OTHER CLINICAL BASIS USED TO MAKE YOUR DECISION:**

*(Check any of the following that were used in the course of your review.)*

- ACOEM-American College of Occupational & Environmental Medicine UM Knowledgebase.
- AHCPR-Agency for Healthcare Research & Quality Guidelines.
- DWC-Division of Workers' Compensation Policies or Guidelines.
- European Guidelines for Management of Chronic Low Back Pain.
- Interqual Criteria.
- Medical judgement, clinical experience and expertise in accordance with accepted medical standards.
- Mercy Center Consensus Conference Guidelines.
- Milliman Care Guidelines.
- ODG-Official Disability Guidelines & Treatment Guidelines.
- Pressley Reed, The Medical Disability Advisor.
- Texas Guidelines for Chiropractic Quality Assurance & Practice Parameters.
- Texas TACADA Guidelines.
- TMF Screening Criteria Manual.
- Peer reviewed national accepted medical literature (provide a description).
- Other evidence-based, scientifically valid, outcome-focused guidelines (provide a description): AAOS Instructional Course Lecture: Spine, The Adult Spine, 2<sup>nd</sup> Edition, Frymoyer.