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PATIENT CLINICAL HISTORY [SUMMARY]:

Claimant is a X with a date of injury of X. Claimant reports X. Prior treatment has included X, X, X, X.

X: CT X. Impression-X: broad X. X: multifactorial changes with moderately severe X. X: broad X.

X: MRI X. Impression-X: broad X. X: multifactorial changes including X, better seen on today's X: broad X.

X: Progress Note by Dr. X. Pt has received X without improvement. The present X remains X. Today X pain is X. Aggravating conditions include X. Alleviating conditions include X. X can walk X minutes at a time secondary to X pain. The remaining X of the symptoms include X pain and X since X. Symptoms radiate along the X. The X pain changes from X. Today the X pain is a X. The LLE pain is X. Pt reports that PT did not help. Also reports having a X. X were suspended because of the X they caused, which X had to be hospitalized. On X has X the X pain by X and the X pain by X. On X. Afterwards, the pain has begun steadily. On X the PT received X evaluation clearance from Dr. X and the PT continues to be interested in a X. The PT has failed X treatment and wishes to have X. Active Medications: X. On

Physical Exam: X with pain. X. I stressed the need for proper body mechanics. X to affected area. Pt should maintain weight. Pt has not reached MMI and is interested in X. Physical Therapy had been helping the X pain as well to recondition the X pain, which now has returned, as well as the new X, which was not here before. We discussed X discogram. It will help to identify if the PT has X pain. Prescribed X.

X: UR by Dr. X. Rationale- The clinical basis for denying these services or treatment: A peer to peer discussion was unsuccessful despite calls to the doctor's office.

X: We have received denial for the previously requested X only because there was no peer to peer contact. At no point no medical rationale was given, although the patient meets the criteria for this study. Therefore, at this point we will submit a reconsideration an effort to help this patient appropriately. Add X to go with X.

X: UR by Dr. X. Rationale- Official Radiology report was not provided to verify the reported findings. The X evaluation report was not prided for review. ODG-TWC notes that X is not recommended, however, if a provider and payor agree to perform anyway, criteria include X; an MRI; satisfactory results from a X evaluation. In this case, the current request does not meet the guidelines.

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

The previous adverse decision is Upheld. The patient injured X on X. X has X pain with X pain, mostly affecting the X. X demonstrates a X. The X. X had temporary improvement in X symptoms with X. The treating provider has recommended a X to determine whether the patient has X pain. The Official Disability Guidelines (ODG) does not recommend X. However, it can be useful for surgical decision making. Based on the records reviewed, there are no plans for X for this patient. Therefore, the request for X is considered not medically necessary.

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

- ACOEM- AMERICAN COLLEGE OF OCCUPATIONAL & ENVIRONMENTAL MEDICINE UM KNOWLEDGEBASE
- AHRQ- 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 JUDGMENT, CLINICAL EXPERIENCE, AND EXPERTISE IN ACCORDANCE WITH ACCEPTED MEDICAL STANDARDS
- MERCY CENTER CONSENSUS CONFERENCE GUIDELINES
- MILLIMAN CARE GUIDELINES

AMENDMENT:

- ODG- OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES
- PRESLEY REED, THE MEDICAL DISABILITY ADVISOR
- TEXAS GUIDELINES FOR CHIROPRACTIC QUALITY ASSURANCE & PRACTICE PARAMETERS
- TMF SCREENING CRITERIA MANUAL
- PEER REVIEWED NATIONALLY ACCEPTED MEDICAL LITERATURE (PROVIDE A DESCRIPTION)
- OTHER EVIDENCE BASED, SCIENTIFICALLY VALID, OUTCOME FOCUSED GUIDELINES (PROVIDE A DESCRIPTION)