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PATIENT CLINICAL HISTORY [SUMMARY]:

The enrollee has a history of a work-related X. X course has been complicated since that time, and has included X. X also has XX.

The enrollee has been living in the community with X for a prolonged period of time. The X is reported to have learned to provide care as of X. The enrollee has been essentially dependent for all or most of X care and mobility for a chronic period of time. As of X, X condition was noted to have worsened over a period of the last X months. X is X. X has a X, but has not been using it because it has caused pain. It is

reported that X has been advised not to use a X due to risk of “severe damage and pain to the X region.” X is unremarkable at X” and X lbs. (X), although X is unable to X. X has been X. X caregivers have found these X. X has required assistance X. X requires assistance to X. X is reported to require “X, but the records largely indicate that X has been X, with no clear indication that X is actually X. X was placed on X, which have successfully prevented X. X has become X, at non-predictable times. X is fragile and X easily. X has X in X X cycle. X has impaired X. X requires X. X have been under control with X.

A X for the home have been requested. The enrollee’s X is reported to have had a X limiting X capacity to assist, although the dates that this condition was/is active are not documented. The enrollee apparently has had X.

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

The enrollee is dependent for X. These needs can be X. A home health aide is needed X hours per day to attend to these needs. Without this assistance, X. This service is recommended to provide X. Therefore, this is in concert with Official Disability Guidelines criteria.

The enrollee requires X care. X is required to X. X is also required to perform regular X. These oversight skills are not available to unskilled caregivers. These skilled services, however, can be provided during intermittent visits by skilled nursing X hour daily) for around the clock implementation by the caregivers, and do not require X hour in home presence by a skilled nurse. As the enrollee’s condition can be dynamic, these needs can be reassessed over time.

The currently available records do not support the X. There is no documentation provided of X that establish that the enrollee is actually undergoing X as mentioned in the physician’s correspondence. The

available records suggest X is X, without indication of incomplete voiding. There are no actual documented X, i.e., with dates and X volumes. There is no indication in the available records of X. There is no objective rationale for not using a X, which would likely increase, not decrease, the safety of X.

Therefore, I have determined that the records X. The records do not support the necessity of X.

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
- 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 NATIONALLY ACCEPTED MEDICAL LITERATURE (PROVIDE A DESCRIPTION)
- OTHER EVIDENCE BASED, SCIENTIFICALLY VALID, OUTCOME FOCUSED GUIDELINES (PROVIDE A DESCRIPTION)