

17119 Red Oak Rd Unit # 90333 Houston, TX 77090 281-836-6171

PATIENT CLINICAL HISTORY [SUMMARY]:

The patient is a X who sustained injury on X while X. MRI of X dated X revealed X. X-rays of X dated X revealed X. EMG dated X revealed X.

Clinic visit with Dr. X dated X revealed the patient complained of X. X received X. However, pain was X. Pain was improved with X. The patient was X. X also complained of X. A previous episode in X was treated with X. Physical exam revealed X. X testing revealed pain with X. The patient had X. The recommendation was made for X.

This case underwent 2 previous adverse determinations. Dr. X on X found the case non-certified due to insufficient supporting documentation (MRI and EMG reports), and Dr. X on X found the case non-certified due to lack of X.

ANALYSIS AND EXPLANATION OF THE DECISION INCLUDE CLINICAL BASIS, FINDINGS, AND CONCLUSIONS USED TO SUPPORT THE DECISION: According to Official Disability Guidelines (ODG), the criteria for X. X must be corroborated by imaging studies and when appropriate, X testing, unless documented pain, X. In this case, the X exam revealed X. MRI revealed X. While EMG findings did not reveal X in this case, the guidelines allow exception when X. This patient has X.

In regard to X is supported by the guidelines to determine the level of X pain when the diagnosis remains uncertain after a standard evaluation

using a X. It would be supported in this case to evaluate a X. Thus, it is the professional opinion of this reviewer that the patient meets guideline criteria of X.

Therefore, the request for X.

A DESCRIPTION AND THE SOURCE OF THE SCREENING CRITERIA OR OTHER CLINICAL BASIS USED TO MAKE THE DECISION: Official Disability Guidelines (ODG)