

## **IMED, INC.**

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### **PATIENT CLINICAL HISTORY [SUMMARY]:**

This claimant was injured while X was working. The medical records that have been provided indicate that the claimant X. The treatment records indicate that X had X. The X reports note X.

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

This claimant has already received an X. X has near X. The MRI and the specialist consultation have confused the issues. If there were an original X, it has long since healed. The claimant is moderately X and that condition would contribute to any residual symptoms. Any residual discomfort is from X and is not related to the compensable injury.

Therefore, due to lack of compliance with ODG recommendations, the request for X is non-certified and not medically necessary.

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

**X ODG- OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES** ODG Physical Therapy Guidelines