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### DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

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# A DESCRIPTION OF THE QUALIFICATIONS FOR EACH PHYSICIAN OR OTHER HEALTH CARE PROVIDER WHO REVIEWED THE DECISION

MD Board Certified in X.

### **REVIEW OUTCOME**

Upon independent review the reviewer finds that the previous adverse determination/adverse determinations should be:

X

#### PATIENT CLINICAL HISTORY [SUMMARY]:

The patient is a X who sustained a X. The patient is X. Additionally, the patient has a X. The patient X and X and X, which X. Artifact makes it difficult if not impossible to X. The patient was evaluated on X. The patient reports X. X were denied. The provider recommends X. They also discussed X. The patient states that X used to get X. Current medications include X. Examination demonstrated X, and X.

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

Per ODG references, the requested X is not medically necessary. As stated in the prior decisions, it appears that, as of the last clinical note, the patient was X. Also, there X. With it is X, it is not recommended by ODG to perform X.

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

OCCL	ACOEM- AMERICAN COLLEGE OF JPATIONAL & ENVIRONMENTAL MEDICINE WLEDGE BASE
	AHCPR- AGENCY FOR HEALTHCARE ARCH & QUALITY GUIDELINES
	DWC- DIVISION OF WORKERS PENSATION POLICIES OR GUIDELINES
	EUROPEAN GUIDELINES FOR MANAGEMENT HRONIC LOW BACK PAIN
	NTERQUAL CRITERIA
EXPE	MEDICAL JUDGEMENT, CLINICAL RIENCE AND EXPERTISE IN ACCORDANCE I ACCEPTED MEDICAL STANDARDS
U N	MERCY CENTER CONSENSUS CONFERENCE LINES
	MILLIMAN CARE GUIDELINES

Ω 8. TDF	ODG- OFFICIAL DISABILITY GUIDELINES EATMENT GUIDELINES
Q 1 KL	ATMENT GOIDLLINES
	PRESSLEY REED, THE MEDICAL DISABILITY
ADVIS	JK
	TEXAS GUIDELINES FOR CHIROPRACTIC LITY ASSURANCE & PRACTICE PARAMETERS
QUA	LITT ASSURANCE & TRACTICE TARAPIETERS
	TMF SCREENING CRITERIA MANUAL
	PEER REVIEWED NATIONALLY ACCEPTED LITERATURE (PROVIDE A DESCRIPTION)
	OTHER EVIDENCE BASED, SCIENTIFICALLY
VALID, O	UTCOME
FOCI	JSED GUIDELINES