Pure Resolutions LLC

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DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE: \boldsymbol{X}

A DESCRIPTION OF THE QUALIFICATIONS FOR EACH PHYSICIAN OR OTHER HEALTH CARE PROVIDER WHO REVIEWED THE DECISION: ${\rm X}$

REVIEW OUTCOME:

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

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PATIENT CLINICAL HISTORY [SUMMARY]:

X who was injured on X. was working in an X. The diagnosis was X. On X was evaluated by X, MD for a follow-up of X. The X. X showed the X. There was X. The X and X were X. X was X. There was X to the X. X was able to X. There were X. X was X. Treatment to date included X and X. In a letter dated X, CP stated the X was medically necessary for X for achieving the following goals: X necessary X, a peer review was performed by X, MD. X that the request for X was not medically necessary. Rationale: "In this case, the injured worker had a X. Guidelines do not recommend X. Therefore, the request for a X is not medically necessary." On X, CP appealed the denial of X. stated, "The X". It will provide X with the X. The X is necessary for to be X. Providing X with the X will X. Per a Peer Review Report dated X by X, MD, the appeal request for X was not medically necessary. Rationale: "This is not typically X, per ODG. The injured worker is X. This request would not likely X. Thus, the request for a X is not medically necessary."

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

In this case, the claimant suffered a X. The claimant has a X. The records noted that the claimant had X. Per current evidence-based guidelines, X is not recommended X. There is X. There was X and X noted on X. X were X that would X. Therefore, the request is not medically necessary and upheld.

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

☑ MEDICAL JUDGMENT, CLINICAL EXPERIENCE, AND EXPERTISE IN ACCORDANCE WITH ACCEPTED MEDICAL STANDARDS

☑ ODG- OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES