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Notice of Independent Review Decision

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE: X

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

REVIEW OUTCOME:

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

INFORMATION PROVIDED TO THE IRO FOR REVIEW:

X

PATIENT CLINICAL HISTORY [SUMMARY]:

The patient is a X whose date of injury is X. X was X. Treatment to date is noted to include X. Diagnoses include X. Initial consultation dated X indicates that the patient X. Office visit report dated X indicates that the claimant continues with X. The claimant complains of X. The claimant reports X. Since last session, the claimant has X. The claimant's X. The X presents as X. The X is X. Plan is to X. Office visit report dated X indicates that claimant continues with X. The claimant complains of X. The claimant is in X. Since last session, the claimant has X. The claimant's affect presents as X. The mood presents as X. The behavior is X. Plan is to X. Initial diagnostic screening report dated X indicates that the claimant X. Affect was X. The claimant has X. The claimant reported affective symptoms X. X score is X. These scores are X. X score is X. The X score is X which is X. The claimant has score of X. The claimant reported having X. During this past week, the claimant

has X. The provider Recommends X.

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

The request for X. The initial request was X. (The provider should X.). In this case, it is noted that the claimant was X. There is X. There is also X. With limited evidence of improvement in X. X is recommended.”

The denial was X, “Regarding X. (The provider should X.). In this case, the claimant has been X. There is X. There is X. With limited evidence of improvement from X. X is recommended.” There is X. The submitted clinical records indicate that this patient has X. The Official Disability Guidelines would X. The submitted clinical records X. Therefore, X.

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

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

X ODG- OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES