

## 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

X who sustained a X injury in X. X was diagnosed with "X". On X reported X. Prior treatment included X. X include X. The procedure was denied by Dr. X due to "X". Per ODG... "X".

### PATIENT CLINICAL HISTORY SUMMARY (continued)

Appeal reply by Dr. X indicated that X. Similar X. However, X.

Dr. X note from X indicates that patient has X.

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

## **SUPPORT THE DECISION**

**X**

**Rationale:** Dr. X excellent note from X indicates that patient has X. X also indicates patient has X. Per ODG, "X". There is clear documentation from the X. As a X who actually trained under Dr. X who was one of the X of the "X", X agree with Dr. X that the X.

**The requested service:** X.

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

ACOEM-AMERICAN COLLEGE OF OCCUPATIONAL &  
ENVIRONMENTAL  
MEDICINE UM KNOWLEDGE BASE

AHCPR-AGENCY FOR HEALTH CARE RESEARCH &  
QUALITY GUIDELINES

DWC-DIVISION OF WORKERS COMPENSATION  
POLICIES OR GUIDELINES

EUROPEAN GUIDELINES FOR MANAGEMENT OF  
CHRONIC LOW BACK PAIN

INTERQUAL CRITERIA

**MEDICAL JUDGEMENT, CLINICAL EXPERIENCE &  
EXPERTISE IN ACCORDANCE WITH ACCEPTED MEDICAL  
STANDARDS X**

MERCY CENTER CONSENSUS CONFERENCE  
GUIDELINES

MILLIMAN CARE GUIDELINES

**ODG-OFFICIAL DISABILITY GUIDELINES & TREATMENT  
GUIDELINES X**

PRESSLEY REED, THE MEDICAL DISABILITY ADVISOR

TEXAS GUIDELINES FOR CHIROPRACTIC QUALITY  
ASSURANCE & PRACTICE PARAMETERS

TMF SCREENING CRITERIA MANUAL

PEER REVIEWED NATIONALLY ACCEPTED MEDICAL  
LITERATURE (PROVIDE DESCRIPTION)

OTHER EVIDENCE BASED, SCIENTIFICALLY VALID,  
OUTCOME FOCUSED GUIDELINES (PROVIDE DESCRIPTION)