Phone: 214 732 9359 | Fax: 972 980 7836

### 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:

⊠ Upheld		(Agree)
Overturned	(Dis	sagree)
Partially Overt	urned	(Agree in part/Disagree in part)

#### INFORMATION PROVIDED TO THE IRO FOR REVIEW

17304 Preston Road, Suite 800 | Dallas, Texas 75252 Phone: 214 732 9359 | Fax: 972 980 7836

### PATIENT CLINICAL HISTORY [SUMMARY]:

The patient is a X. X was injured on the job while X. X was X. This resulted in X.

X was taken to the X. The X was X. It only showed a X. X was seen by a X on X who ordered an X. X was then seen by another X on X who recommended a 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.

The X is not indicated since X has already had a X. Such a test will not change the current diagnosis of X. Also, the report of the X.

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

ACOEM- AMERICAN COLLEGE OF
OCCUPATIONAL & ENVIRONMENTAL MEDICINE KNOWLEDGE BASE
AHCPR- AGENCY FOR HEALTHCARE RESEARCH & QUALITY GUIDELINES
DWC- DIVISION OF WORKERS COMPENSATION POLICIES OR GUIDELINES
EUROPEAN GUIDELINES FOR MANAGEMENT OF CHRONIC LOW BACK PAIN
INTERQUAL CRITERIA



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MEDICAL JUDGEMENT, CLINICAL EXPERIENCE AND EXPERTISE IN ACCORDAN WITH ACCEPTED MEDICAL STANDARDS	CE
MERCY CENTER CONSENSUS CONFERENT GUIDELINES	1CE
☐ MILLIMAN CARE GUIDELINES	
ODG- OFFICIAL DISABILITY GUIDELINE TREATMENT GUIDELINES	S &
PRESSLEY REED, THE MEDICAL DISABIL ADVISOR	_ITY
TEXAS GUIDELINES FOR X QUALITY ASSURANCE & PRACTICE PARAMETERS	
☐ TMF SCREENING CRITERIA MANUAL	
PEER REVIEWED NATIONALLY ACCEPTE MEDICAL LITERATURE (PROVIDE A DESCRIPTION	
OTHER EVIDENCE BASED, SCIENTIFICA VALID, OUTCOME	LLY
FOCUSED GUIDELINES	