

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

Provide a description of the review outcome that clearly states whether **medical necessity exists** for **each** of the health care services in dispute.

**INFORMATION PROVIDED TO THE IRO FOR REVIEW:**

X

**PATIENT CLINICAL HISTORY [SUMMARY]:**

The patient is a X who was injured on X, when the patient X.

On X, X performed at X for X and X following X injury showed X.

On X, a X from X indicated the patient had X following a X. The was rated at X. The X was localized in the X. The X aggravated by X. The treatment attempted was use of X. The problem X. The patient had X.

On X, X of the X performed at X showed: X.

On X, the patient was seen by X, X, for follow-up on X. The patient described the X as X. X had X in the X recently and was X. On exam, the X was X with X. The X was X in the X. The diagnoses were X. X and X referral were ordered. X and X were prescribed. The patient was advised to work with X.

On X, the patient was seen by X, for X. The patient experienced X. X experienced X as well as X. The X was X and had been present since X. The X was rated at X. The X was X with X. The patient had attempted X such as X as well as X. The patient had X on X, for X following X in X. The patient previously had X. On exam, the patient had X in X and X. X were X in the X and X. There was X. X was X in X with X noted. The X was X. The patient was X in X on the X. The diagnoses were X. The patient was to continue with X. X reported that the X was X. X was to follow-up in the clinic as needed.

On X, X performed at X showed: 1) X. 2) X.

On X, the patient was seen by X for X. The patient experienced X. The symptoms were X and have been present for X and have not X. The X rated at X. On exam, X was X on the X. X was X in the X. The diagnoses were X. The X of the X was reviewed. X were reviewed and no changes were made. The option of X was reviewed. The patient did wish to pursue sooner rather than later.

Per Utilization Review dated X, from X, the request for X was denied on the basis of following rationale: *"The requested X is not medically necessary or appropriate. The X has not been submitted for review. Without this information, the requested X cannot be certified. Therefore, the request for X is non-authorized. Criteria/ Guidelines Used: Official Disability Guidelines by MCG X (update date: X) X. Conditionally Recommended X. X."*

On X, a X was completed by X for X for the diagnosis of X.

Per Reconsideration dated X, from X, the request for X was upheld on the basis of following rationale: *"Official Disability Guidelines (ODG) by MCG (X), Evidence-Based Medical Treatment Guidelines, X (Updated X) states, X"*.

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

ODG Criteria Patient criteria for X: (1) X (X or injury to X that typically causes X and/or X or X in the X supplied with X from X) must be well documented, along with objective X findings on physical examination. X must be corroborated by advanced imaging studies (e.g., X) and, when appropriate, X testing, unless documented X support a X diagnosis. A request for the procedure in a patient with X requires additional documentation of recent symptom X associated with X. (2) X to conservative treatment (e.g., X). Please refer to above note for extensive criteria.

The following is a summary review from the notes provided documenting X with X and X. X, Patient has X to X stopping at X, X on the X with X and X described as X. The symptoms were X and have been present for X and have not changed since X. The X level rated at X. On exam, a X (X) X was X on the X. X was X in the X. X, X was X in X with X noted. The X was X.

Correlating X findings on exam with imaging. On X, X performed at X showed: 1) X of the X with X and X. Additional X was seen at these X in addition to the X. 2) X leads into the X at X. The findings demonstrated X revealed X. X entered the X at X. The X were X. X showed X. The X terminated at the X. X: There was X. X: There was X. There was X. X: There was X. There was X. X caused X. X: There was X. There was some X. There was X to about X. X and X contributed to X along the X. X was seen. X: There was some X causing X. Some X and X was seen. Some X along the X of X was present as well as X. X and X were X.

The patient had attempted X such as X as well as X, use of X and X that gave X, and the use of X and X that gave X, and X.

According to the ODG, X is defined as X in X. X: The use of X to treat symptoms secondary to X is limited. The most efficacious use of this treatment found in the literature is for patients with X.

As outlined above, the patient has met the criteria for X. Thus, X is medically necessary and certified.

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

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