



**MEDICAL EVALUATORS
OF T E X A S ASO, L.L.C.**

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**Notice of Independent
Review Decision**

DESCRIPTION OF THE SERVICE 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 should be: X

INFORMATION PROVIDED TO THE IRO FOR REVIEW

X

EMPLOYEE CLINICAL HISTORY [SUMMARY]:

Mechanism of injury:

The claimant is a X who was injured on X while X. The claimant was diagnosed with X.

Diagnostic studies:

X from X dated X documented the following impressions: "X."

Surgeries:

The claimant underwent a X.

Conservative Treatment:

The claimant has been treated with X.

Medications:

List of prior medications provided include X.

Progress notes:

Office Visit from X dated X documented the claimant reported a X. The claimant reported X. Documented physical findings included X. The claimant was diagnosed with X. X X, MD recommended the claimant begin X.

Office Visit from X. It is documented the claimant has previously attempted X.X, MD also documented the claimant has previously tried X. Documented physical findings included X. The claimant was diagnosed with X.

Office Visit from X. X, MD documented the claimant's pain X. Dr. X documented X.

Office Visit from X. X, MD documented X.

Office Visit from X. X, MD documented X.

Office Visit from X. The claimant reported X. X, MD documented X. Dr. X recommended the claimant undergo a X.

Office Visit from X. X, MD documented the claimant's pain X. Dr. X reported X. Dr. X recommended the claimant X.

Office Visit from X. X, MD documented X. Dr. X recommended the claimant undergo X.

Office Visit from X. X, MD documented X. Dr. X recommended the claimant X.

Office Visit from X. X, MD X. Dr. X recommended the claimant undergo X.

Denial Letter:

Prior UR dated X denied the request for X. In this case, while the claimant continued to complain of X.

Additionally, X. Finally, there was X. As such, the request for X.”

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

The claimant is a X who was injured on X. The claimant was diagnosed X. The request is for X.

X include X. X may provide X. In this case however, X. Hence, attempting X. ODG Criteria specifically states treatment should be “X”, X. In case, the claimant was X. In addition, X.

Therefore, based on the referenced X.

A DESCRIPTION AND THE SOURCE OF THE SCREENING CRITERIA OR OTHER CLINICAL BASIS USED TO MAKE THE DECISION:**1. ODG- OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES**

-X

