



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

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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

X

INFORMATION PROVIDED TO THE IRO FOR REVIEW

X

EMPLOYEE CLINICAL HISTORY [SUMMARY]:

Mechanism of injury:

The claimant is a X was injured on X when an X. The claimant was diagnosed with X.

Diagnostic studies:

X from X dated X documented the following X. There is a X. This X causes X. There is X. 3. Please refer to the X.”

X from X dated X documented the following X. 2. No X. 3.X. 4.X.”

Surgeries:

The claimant underwent X.

Conservative Treatment:

No documentation of any X.

Medications:

X

Progress notes:

Progress Note by X, MD dated X documented the claimant presented for a follow-up on X. The claimant is X. Dr. X documents that the claimant still has X. The claimant reports return of X. X is X. The X. The claimant would like to X. The claimant was diagnosed with X.

Progress Note by X, MD dated X documented the claimant presented for a follow-up on X. The claimant is X. X reports X. X has been performing a X. The claimant would like to X. The claimant was diagnosed with X.

Reason for request:

Prior X “An X. There should be X. Although this injured employee complaints of 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 with X. The request is for an X.

According to ODG, X. The medical documentation provided revealed the claimant does X. The documentation also X. Additionally, since it would be a X. The medical records provided X.

Therefore, based on the referenced evidence-based medical literatures, as well as the clinical documentation stated above, it is the professional medical opinion of this reviewer that the request for an 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