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## Notice of Independent Review Decision

### IRO Reviewer Report

**IRO Case #:** X

**Description of the service to 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

### Information Provided to IRO for Review:

X

### Patient Clinical History [Summary]:

All of the listed records were reviewed.

The member is a X individual who sustained an injury on X. The member sustained an injury when the member's right leg fell through a gondola grate 5 feet in the air.

The member was diagnosed with strain of muscle, fascia, and tendon of the right hip, contusion of right hip, contusion of the right thigh, contusion of right knee, contusion of the right lower leg, sprain of other specified parts of gait and mobility, strain of unspecified muscle, fascia and tendon at wrist and hand level of the left hand, and sprain of ligaments of the lumbar spine.

According to a follow-up evaluation by X, P.A., dated X, the member presented with left 5th digit pains rated 5/10, mid and lower back pain rated 4/10, right knee pain rated 3/10, and right-hand pain rated 3/10. The grip strength remained the same, with weakness noted over the 5th digit. The swelling remained the same. Overall, the symptoms in the lumbar spine decreased. There was lower extremity weakness decreased. The physical examination of the left hand revealed that edema remained the same, muscle testing remained weak, and 4+/5 grip strength only at the 5th digit. The physical examination of the lumbar spine revealed no abnormalities. The physical examination of the right knee revealed no abnormalities. X-rays of the right knee were negative for fracture or dislocation. A magnetic resonance imaging of the left hand demonstrated osteoarthritic changes in the radiocarpal joint, scaphotrapezial joint, and 1st carpometacarpal joint base thumb and metacarpophalangeal joint of the thumb. The diagnoses were a strain of muscle, fascia, and tendon of the right hip, contusion of the right hip, contusion of the right thigh, contusion of the right knee, contusion of the right lower leg, sprain of other specified parts of gait and mobility, the strain of unspecified muscle, fascia, and tendon at wrist and hand level of the left hand, and sprain of ligaments of the lumbar spine. The plan included X, right knee magnetic resonance imaging, functional capacity evaluation, continuing physical therapy, and follow-up on X. The member was on restricted duty.

According to a work status report dated X, the member was allowed to return to work as of X with restrictions that were expected to last through X.

1. X.

Upheld

In this case, the member sustained an injury on X. The medical records document that the member's right leg fell through a gondola grate 5 feet in the air. The member complained of right knee pain, which was rated 3 out of 10. The right knee exam shows a normal range of motion, with flexion at 110 degrees and extension at normal. The strength is normal. The medial collateral ligament and the lateral collateral ligament are normal. The Lachman test is negative. The gait is normal. The right knee X-ray is negative for fracture or dislocation. The lower extremities exam shows a full range of motion. The deep tendon reflexes are normal. The sensation is normal. The strength is normal. The gait is normal. Based on the medical records provided for review, there are insufficient examination findings to support the request. There are no abnormal findings during the exam. In addition, the member was allowed to return to work as of X. No documentation is provided to demonstrate that the member is still able to receive therapy, and no physical therapy notes have been submitted for review. The request for an X is not medically necessary.

**A description, and the source of the screening criteria or other clinical basis used to make the decision:**

ODG by MCG

Last review/update date: Dec 01, 2023

X