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Notice of Independent Review Decision

IRO reviewer report

X; amended X

IRO case number: 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.

According to the medical records provided, the member is a X who sustained an injury on X. The mechanism of injury involved X.

The member was diagnosed with intervertebral disc disorders with myelopathy, lumbar region, strain of muscle, fascia, and tendon of lower back, initial encounter, intervertebral disc disorders with radiculopathy, lumbosacral region.

On X, the member was evaluated at X for complaints of low back pain with left leg symptoms related to a work injury sustained on X while lifting a X. The member reported persistent low back pain rated X, described as stabbing, throbbing, sharp, and shooting, with radiation to the left hip and lumbar region, associated with numbness, tingling, weakness, and pain with movement. Symptoms are aggravated by bending, stretching, reaching, and prolonged activity and are partially alleviated by X. The member previously underwent X. Physical examination revealed lumbar spine findings with motor strength X in the lower extremities, reflexes X, X Babinski and clonus, normal sensation, X straight leg raise, and decreased sensation in the X. Magnetic resonance imaging of the lumbar spine dated X demonstrated disc degeneration at X, with the most severe findings at X, including a X. Diagnoses include intervertebral disc disorder with radiculopathy of the lumbar region and intervertebral disc disorder with radiculopathy of the lumbosacral region. On X, the member was a X, who underwent a work conditioning evaluation for lumbar pain with radiculopathy related to a work injury sustained on X while X. The member reported persistent low back pain radiating down the left lower extremity, with functional limitations including heavy lifting, prolonged positions, and decreased endurance. The member previously underwent X. The member reported pain scores ranging from X at best, X at worst, and X currently, with post-test pain rated X. Functional testing demonstrated that the member was unable to meet job demands, achieving X (X) of the required job tasks, with a current safe lifting capacity of X pounds compared to job requirements of X pounds, and pushing/pulling capacity of X pounds over X feet, which remains below job demand levels. Physical examination demonstrated reduced lumbar range of motion (flexion X and extension X compared to normal X and X), decreased lower extremity strength, particularly in the left lower extremity, diminished sensation bilaterally below the calf, and tenderness of the left gluteal musculature and lumbar paraspinals. Functional assessment tools yielded McGill Pain Questionnaire and Modified Oswestry Disability Index scores of X and X, respectively, indicating moderate perceived disability.

Upheld

Analysis and explanation of the decision include clinical basis, findings, and

conclusions used to support the decision. In this case, the member sustained a work-related injury on X while lifting a X. On X, the member was evaluated for persistent low back pain with left leg symptoms related to the injury. Pain was rated X and described as stabbing, throbbing, sharp, and shooting, radiating to the left hip and lumbar region, with associated numbness, tingling, weakness, and pain with movement. Conservative treatments, including X. Lumbar spine examination showed X lower extremity strength, reflexes X, X Babinski and clonus, X straight leg raise, and decreased sensation in the X. A X lumbar MRI demonstrated disc degeneration at X, and X, most severe at X with a broad-based disc protrusion, foraminal stenosis, and neural compression. On X, a work conditioning evaluation noted persistent low back pain radiating to the left lower extremity with limitations in heavy lifting, prolonged positions, and endurance. Examination showed reduced lumbar range of motion (flexion X, extension X), decreased left lower extremity strength, diminished sensation below the calf bilaterally, and tenderness of the left gluteal and lumbar paraspinal muscles. Functional scores included a McGill Pain Questionnaire score of X and a Modified Oswestry Disability Index score of X, consistent with moderate disability. Based on the medical records provided for the review, the records reflect that the member is being considered for surgery as outlined in the X note, "Surgery is being discussed. X is to avoid surgery." However, the guidelines specifically state that "the member is not a surgical candidate." The guidelines have not been met. Thus, medical necessity cannot be established. The request for 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: X

X

Treatment type: Physical Medicine