

IRI

August 26, 2003

Re: Medical Dispute Resolution
MDR #: M5-03-2143-01
TWCC#:

IRI has performed an independent review of the medical records of the above-named case to determine medical necessity. In performing this review, **IRI** reviewed relevant medical records, any documents provided by the parties referenced above, and any documentation and written information submitted in support of the dispute.

The independent review was performed by a matched peer with the treating health care provider. This case was reviewed by a physician who is certified in Chiropractic Medicine.

Clinical History:

This female claimant received an injury to her right shoulder and right wrist while at work on 09/18/01. She underwent conservative therapy and cortisone injections in her right shoulder, and was released at MMI. On 03/04/02, she reported an exacerbation of her previous symptoms with sharp, shooting pains and a burning sensation with pain during range of motion. She began conservative care and rehab. She was evaluated by an orthopedist, who did not think surgery was needed, and prescribed continued therapy

Disputed Services:

Office visits and rehabilitation during the period of 04/22/02 through 07/19/02.

Decision:

The reviewer disagrees with the determination of the insurance carrier and is of the opinion that the services in question were medically necessary in this case.

Rationale:

Treatment length is usually up to eight weeks after the initial phase of care for patients falling into the secondary level of case. It is clear that the patient was responding, however slowly, to the therapies. Her range of motion and strength continued to improve without plateauing. She shows indicators that would place her into the secondary level of care as noted in the *Spinal Treatment Guidelines*, Section 134.1001, Table 2, in which it states, "This intervention is the first stage of rehabilitation for those individuals who have not returned to productivity through the normal healing process. It is designed to facilitate return to productivity before chronic disability."

Behavioral indicators that apply in this case are:

1. History of an injury or illness that is limited to good response to early primary treatment (persistent symptoms of limitations of activities of daily living).
2. Objective physical examination findings suggestive of early deconditioning (loss of motion and/or strength or limitation of activities of daily living).
3. No significant structural pathology suggesting surgical solutions.

According to Texas Labor Code 408:021(a), an employee is entitled to the care reasonably required in association with their injury and the treatment thereof. If the patient's condition is not stable, the care to maintain and promote healing is medically necessary.

and I certify that the reviewing healthcare professional in this case has certified to our organization that there are no known conflicts of interest that exist between him and any of the treating physicians or other health care providers or any of the physicians or other health care providers who reviewed this case for determination prior to referral to the Independent Review Organization.

Sincerely,