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From: Mariana Jimenez Fax: 17138804400 To: Fax: (562) 506-0355 Page: 1 of 8 04/16/2024 7:20 AM



Date: 04/16/2024

To:

Fax Number: +15625060355

From: Mariana Jimenez

Fax Number: 281-866-9405

Note:

Robin Pyle

Claim #: 241131723

Please send determinations to the Pre-Authorization Dept at 281-866-9405. If you have any questions, please contact:

# Mariana Jimenez

Pre-Authorization Specialist Nova Medical Centers- Centralized Business Office t: 281)866-9003 f: 281)866-9405

marianajimenez@n-o-v-a.com

From: Mariana Jimenez Fax: 17138804400 To: Fax: (562) 506-0355 Page: 2 of 8 04/16/2024 7:20 AM



Nova Medical Centers Centralized Billing Office 550 Club Drive, Suite 244 Montgomery TX 77316 Ph: 281-866-9003 Fax: 281-866-9405

# Texas TDI Certified HCN Provider

Fax: 281-866-9405
Centralized Scheduling Department: 888-333-5018

# **PT/OT Pre-Authorization Request Form**

Patient Name:	Robin Pyle
SSN#:	451-47-9913
DOB:	10/1/1969
Address:	3959 Maritza Dr Brownsville, TX 78521
DOI:	3/26/2024
DX:	Sprain of unspecified site of left knee, subsequent encounter s83.92xd unspecified internal derangement of left knee m23.92 unspecified abnormalities of gait and mobility r26.9
Employer:	Brownsville ISD- High Schools 001-033,127
Facility:	Brownsville (2952 Boca Chica Blvd. Brownsville, TX 78521) / Ph: 956-243-8888 / Fax: 281-866-9405
Tax ID:	84-2131917 NPI: 1992924922
Treating Dr:	Mark Bailey, NP AP120564TX
Therapist:	
Claim #:	241131723
Ins. Carrier.	TRI-STAR
Adjuster:	Wanda Williams P: EXT 2926

Number of Visits Requested:	6 (3 times a week for 2 weeks)	Number of Visits Authorized:	
Total PT/OT Visits to Date:	5	Beginning Authorization Date:	· · · · · · · · · · · · · · · · · · ·
	en de la constitución de la cons	Ending Authorization Date:	TATATO TO TATA TATA TATA TATA TATA TATA
Approved by:		Approval Date:	
Written Approval Required:	Yes	Fax or Email to:	562-506-0355
Authorization Number:			
Authorization Number Obtained	**************************************		

Due to unknown future progression of this patient, any combination of CPT codes below may be warranted for this prescription. Any procedures and units performed are provided to reach MMI at the earliest possible date:

From: Mariana Jimenez Fax: 17138804400 To: Fax: (562) 506-0355 Page: 3 of 8 04/16/2024 7:20 AM



# **Easy-Script**

Company: Brownsville ISD- High Schools 001-033,127

Company Phone: 956-548-8061
Patient Name: Robin Pyle
Patient Phone: 956-371-7372

Claim Number: **241131723**Date: **04/15/2024**Date of Injury: **03/26/2024** 

Diagnosis: Sprain of unspecified site of LEFT knee, subsequent encounter \$83.92XD

Unspecified internal derangement of LEFT knee M23.92

Subjective Complaints (what patient states):

Patient present for follow up injury to left knee ps 5/10 with movement and 1/10 without movement. Improvement 40% since doi. Painful rom continues.et.

Knee: Patient presents to the clinic for a: Left knee complaint.

LEFT:

Reviewed Family, Past Medical, Social History, and Review of Systems from 3/29/2024 and there has been no change.

Exam/Results:

Physical: Blood pressure 128 / 82. Pulse 62. Respiratory rate 16. Height (inches) 66. Weight (lbs) 180. BMI: 29, BSA (m²): 1.95. Age 54.

General: Alert and oriented to time, place, and person: Yes. Affect normal. Gait antalgic. Distress no apparent. Patient appears anxious: No. Well developed: Yes. Well nutritioned: Yes.

Billing Procedures Employer #: BRO54	SUBSCRIBER	Emp Ins Code: 03CRK			
Ins/TPA: TRI-STAR	loo/TDA: Proumovillo	***			
PO Box 2805 Clinton, IA 52733-2805	Ins/TPA: Brownsville ISD- High Schools 001-033,127 708 Palm Blvd				
Phone: 210-404-0400/ Fax:	Brownsville, TX 78520				
Ins Code: TRIBV	Phone: 956-548-8061/ Fax: 956-548-8243				
Emp Guarantor#: XBRQ4607	Ins Code: 03CRK				
Price Code: Z	Emp Guarantor#: XB	RO4607			
	Price Code: Z				

## **Continue Physical Therapy**

TIW (three times week) for 2 weeks / 6 visits

Goals: Essential Functions, Functional Improvement, Home Exercise Program

Diagnosis: Sprain of unspecified site of LEFT knee, subsequent encounter S83.92XD, Unspecified internal derangement of LEFT knee M23.92

Weekly frequency and prescription duration may vary to allow for completion of the total prescribed visits.

Statement of Medical Necessity: I deem that the above prescribed treatment is medically necessary.

Physician's Note: Reason for continuing Physical therapy: functional improvement

Mark Bailey, NP for Danielle Coulter, MD

From: Mariana Jimenez Fax: 17138804400 To: Fax: (562) 506-0355 Page: 4 of 8 04/16/2024 7:20 AM

Medical Centers Powered By

Status Report: Follow-Up Evaluation

Time In: 4:13 PM Time Out: 4:34 PM

Treating Doctor: Danielle Coulter, MD

Social Security#: XXX-XX-9913

Industrial Director: Joel Morales

Claim Number: 241131723

Brownsville 2952 Boca Chica Blvd. Brownsville, TX 78521 P: 956-243-8888 F: 956-243-8889

Date: 04/15/2024 Patient Name: Robin Pyle

Home Phone: 956-371-7372

Employer: Brownsville ISD- High Schools 001-033,127

Primary Contact: Adriana Duran

Phone: 956-548-8061 Services Requested

Date of Initial Visit: 03/29/2024

Physical Exam:Follow-Up

**Evaluation** 

Date of Injury: 03/26/2024 Last Worked: 04/15/2024

Description of Injury:

Patient was in the football field when he turn the right and felt a pop to left knee causing pain and discomfort.

Previous Treatment/Emergency room visit for THIS INJURY

None

Subjective Complaints (what patient states):

Patient present for follow up injury to left knee ps 5/10 with movement and 1/10 without movement. Improvement 40% since doi. Painful rom

Knee: Patient presents to the clinic for a: Left knee complaint.

LEFT: Patient states that overall the symptoms have decreased. Range of motion increased. Patient's gait remained the same. Pain decreased. Patient reports a pain level of (Visual Analog Scale) 5. Swelling: None. Bruising: None. Stability normal. Popping persists.

Review of Systems: Constitutional: Night Sweats (-), Fever & Chills (-), Weight Loss (-), Unexplained Weight Loss (-), Fatigue (-)

Eves: Visual Changes (-), Double Vision (-)

ENT: Sinus Pain (-), Tinnitus (-), Nasal Discharge (-), Difficulty Swallowing (-), Difficulty Hearing (-)

Cardiovascular: Chest Pain (-), Irregular Heart Beat (-)

Respiratory: Shortness of Breath (-), Cough (-)

Gastrointestinal: Abdominal Pain (-), Nausea & Vomiting (-), Heartburn (-)

Genitourinary: Dysuria (-), Blood in Urine (-)

Musculoskeletal: Bone Pain (-), Joint Swelling (-), Joint Stiffness (-), Muscle Weakness (-), Shoulder Pain (-), Neck Pain (-), Mid Back Pain (-),

Low Back Pain (-), Hip Pain (-), Foot Pain (-)

Skin: Rashes (-), Skin Lesions (-), Jaundice (-)

Neurological: Loss of Bowl Control /Bladder Control (-), Numbness/Tingling (-), Dizziness/Fainting (-), Forgetfulness/Confusion (-),

Headaches (-), Walking Problems (-)

Psychiatric: Depression/Anxiety (-), Change in Sleep Pattern (-), Mood Change (-)

Endocrine: Excessive Thirst (-), Excessive Hunger (-), Heat or Cold Intolerance (-), Poor Appetite (-) Hematologic/lymphatic: Excessive Bleeding (-), Use of Aspirin (-), Skin Rashes/Discoloration (-)

Immunological: Allergic Response to Food, Material or Drugs (-), History of Anaphylaxis (-), Swollen Glands (-)

Current Medications (at the time of initial evaluation): Metformin, Rosuvastatin, Azor Generic.

Allergies: No Known Allergies.

Past Medical History: Diabetes Mellitus (+), Hypertension (+).

Peptic Ulcer (-), Thyroid Disease (-), Liver/Kidney Disease (-), Stroke/TIA (-), Anemia (-), Epilepsy (-), Arthritis (-), Kidney Infection (-), Sinus Infection (-), Asthma (-), COPD (-), Seizure Disorders (-), Myocardial Infarction (-), Peripheral Vascular Disease (-), Upper GI Disease (-),

DDD/Spinal Stenosis (-), Cancer (-), Heart Disease (-), Neurological Disorder (-), Osteoporosis (-).

Family Medical History: Diabetes (+), HTn (+).

Cancer (-), Heart Disease (-), Stroke/TIA (-), Liver disease (-), Genetic disorder (-), Rheumatoid arthritis (-), Neurological Disorder (-),

Osteoporosis (-), Bleeding disorder (-).

Death of a sibling, parent, child: Diabetes-Mother and father

HTN-Father

Social History: Employed as Teacher/Coach.

Previous Injury: None Surgery: Left knee meniscus Surgery in May 2019. Last Tetanus: 10 year(s) ago.

Reviewed Family, Past Medical, Social History, and Review of Systems from 3/29/2024 and there has been no change.

Exam/Results:

Physical: Blood pressure 128 / 82. Pulse 62. Respiratory rate 16. Height (inches) 66. Weight (lbs) 180, BMI; 29, BSA (m²): 1.95. Age 54.

General: Alert and oriented to time, place, and person: Yes. Affect normal. Gait antalgic. Distress no apparent. Patient appears anxious: No. Well developed: Yes. Well nutritioned: Yes.

Knee:

LEFT: Inspection no obvious deformity. Range of motion flexion increased. Extension returned to normal. Tenderness reported remained the same medical joint line. Strength is increased. Effusion: None. Medial collateral ligament normal. Lateral collateral ligament normal. McMurray test positive medial meniscus. Lachman test negative. Drawer test negative. Bulge sign negative. Dislocation: No. Gait normal: No.

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#### X-rays:

Left Knee: Knee 3 views (ap, lat, sunrise): X-rays were negative for fracture or dislocation (3/29/2024 11:11 AM)

PT assessment and plan reviewed.

#### Diagnosis:

Sprain of unspecified site of LEFT knee, subsequent encounter \$83.92XD Unspecified internal derangement of LEFT knee M23.92 Unspecified abnormalities of gait and mobility R26.9

Physician's Note: Reason for continuing Physical therapy: functional improvement

#### Treatment Plan:

- 1. Continue medications prescribed by a Nova provider on last visit: Motrin 800mg #42
- 2. Patient was advised to follow-up with his/her primary care doctor for non-work related positive review of systems and/or positive past medical history.
  3. Concern for MMT. Order MRI. Continue with HEP and PT. RTC in 2 weeks.
- 4. Diagnostic Imaging/Testing: MRI on Left Knee without contrast.
- 5. Continue physical therapy as prescribed.

Next Appointment(s): MD 04/29/2024 5:00 PM

Work Status: Restricted Duty

Electronically signed by Mark Bailey, NP supervised by Danielle Coulter, MD

4/15/2024 4:32 PM

From: Mariana Jimenez Fax: 17138804400 To: Fax: (562) 506-0355 Page: 6 of 8 04/16/2024 7:20 AM



#### **Physical Therapy Evaluation**

Brownsville

Today's Date: 04/01/2024 Patient: Robin Pyle Referring Provider: Danielle Coulter, MD Next Re-Eval: 05/01/2024 Incident #: 5751480 **Next Provider Visit:** 04/15/2024 **Current Rx Expires:** 04/12/2024 04/01/2024

Date of Injury:

03/26/2024 Start of Care (PT): Surgery Date: Claim Number: N/A XXX-XX-9913

SSN#:

Medical Dx: Sprain of unspecified site of LEFT knee, initial encounter S83.92XD

Unspecified internal derangement of LEFT knee M23.92

#### HISTORY

Chief Complaints: Patient reports that while outside at work he attempted to pivot and turn when he felt a sudden pop in his knee followed by sharp pain. Patient's chief complaints at this time is of pain and limited functional activity endurance.

Prior Level of Function: Independent

Job Description/Essential Functions: Teacher/Coach: Standing, Walking, Lifting 40#, Carrying 40#, Squatting, Bending, and Stair Negotiation.

Prior Injury/Surgery: May 2020 - Left Meniscus Surgical Repair

Personal Factors: Sex: Male. Age: 54 years old - Advanced Age may contribute to delayed routine healing times. Work Status: Light duty with restrictions. Medications: Motrin 800mg #42 - Patient reports symptom relief with medications. Clinical Tests: 03/29 - X-rays are negative for fractures and dislocation. Current Pain Status: Stabbing. Left Knee: 0/10 at rest . 8/10 pain with activity

#### **EXAMINATION**

#### Neuromuscular

Gross Coordinated Movement: Weight shift noted to the RIGHT in weight bearing. Antalgic gait pattern noted with decreased terminal knee extension on LEft and shortened stance time on left.

#### Musculoskeletal

Body Regions			PROM		AROM		MMT		Special Testing	
		Γ	R	L	R	L	R	L	***************************************	R
_ower Extremity		~~~~		***************************************		***************************************	***************************************			
Hip	Flex(100°-125°) L2 - 3				WFL	WFL	4+/5	4-/5!	1	
	Abd(25°-50°)						4+/5	4+/5		
Knee	Flex (110°-135°) L5-S1			***************************************	WFL	WFL	4+/5	3+/5!	Anterior Drawer Test	
	Ext (0°) L2-4				WFL	-2!	4+/5	4-/5!	Lachman's Test	
									McMurray's Test	
									Posterior Drawer Test	
									Thessaly's Test	
									Valgus Stress Test	
									Varus Stress Test	

Soft Tissue/Joint Mobility: Tendemess to palpation noted to medial joint line extending posteriorly into popliteal space. Empty end feel noted in joint mobility assessment with patient reporting medial joint line pain.

Posture: Weight shift noted to the RIGHT with Left knee in slight flexion at rest in standing.

Activity Limitations: Standing, Walking, Lifting 40#, Carrying 40#, Squatting, Bending, and Stair Negotiation.

Participation Restrictions: Patient currently presents with pain in performance of stated work tasks.

Patient cognition is alert and oriented to person, place, thing.

Patient does not have a language or learning barrier.

Patient is aware of diagnosis.

# CLINICAL PRESENTATION is evolving with changing characteristics.

Patient presents with signs and symptoms in accordance with stated mechanism of injury and medical diagnosis. Patient currently presents with treatment diagnosis of meniscus tear to Left knee. Patient does not demonstrate any complicating factors that would inhibit Excellent prognosis for recovery.

#### **CLINICAL DECISION MAKING**

## **Outcome Measures**

Fear Avoidance Components Scale	4/1/2024	Administered	43 Raw Score	20 Sections Completed	43/100 Moderate
Lower Extremity Functional Scale	4/1/2024	Administered	56 Raw Score		70 % Functional Ability

#### Overall Assessment

Patient currently presents as an appropriate candidate for skilled Physical Therapy services secondary to inability to perform stated work tasks without pain. Patient is currently limited in Standing, Walking, Lifting 40#, Carrying 40#, Squatting, Bending, and Stair Negotiation. With skilled therapy intervention patient presents as an excellent candidate for full duty return to work performance.

PLAN OF CARE Three times a week for four weeks

Patient rehab potential/prognosis: Excellent

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First subsequent treatment may be rendered by a Physical Therapist Assistant.

#### **Current Procedural Terminology**

97010 MHP/CP: to Left knee in order to improve range of motion without pain for safe return to work standing, bending, and lifting/carrying.

97140 Manual Therapy Techniques: to L LE to improve pain free range of motion and joint mobility for safe return to work stair negotiation, squatting, and lifting.

97110 Therapeutic Exercises: to L LE to improve pain free strength and functional activity endurance for safe return to work lifting, carrying, and squatting.

97112 Neuromuscular Reeducation: performed to improve body position/posture for safe return to work walking and stair negotiation.

97530 Therapeutic Activities: to L LE to improve body mechanics and dynamic power in safe return to work required lifting, carrying, squatting.

Short Term Goals: 2 Weeks

Increase Left LE MMT To WNL without pain. Increase Left Knee ROM To WNL without pain.

#### Long Term Goals: 4 Weeks

Patient will demosntrate ability to squat and lift 40# Bailey box from floor to mid shelf for 20 repetitions to simulate lifting boxes at work.

Patient will demonstrate ability to perform 10 minutes of level surface treadmill ambulation at 2.0 - 2.5 mph at 1.0 to 5.0% incline to simulate walking on level and uneven surface at work

Patient will demonstrate ability to perform 3 minutes of 8 inch aerobic step up and step downs to simulate stair negotiation at work.

Patient will demonstrate ability to perform 40# bailey box lift and carry from mid shelf to low mat table for 15 repetitions to simulate carrying boxes at school.

#### Discharge Plan

Independent with ADL's without modification.

Return to prior level of function.

The plan of care was discussed with the patient, who voiced understanding and agreed to proceed.

PT Eval: 8 min.

Electronically Signed by: Jonathan Obed Momplaisir, PT, DPT - 1310571, 4/1/2024 5:40 PM

Referring Provider: Danielle Coulter, MD

From: Mariana Jimenez Fax: 17138804400 Fax: (562) 506-0355 Page: 8 of 8 04/16/2024 7:20 AM To:



## **Physical Therapy Daily Note**

Office:

Brownsville

Danielle Coulter, MD

Today's Date: Next Re-Eval:

04/12/2024

Patient: Incident #: Robin Pyle 5751480

Referring Provider:

05/01/2024

Date of Injury:

03/26/2024

**Next Provider Visit:** 04/15/2024 Start of Care (PT): 04/01/2024 **Current Rx Expires:** 

04/12/2024

Surgery Date: Medical Dx:

N/A

Claim Number:

241131723

**Total PT Visits:** 

5

SSN#:

XXX-XX-9913

Sprain of unspecified site of LEFT knee, initial encounter \$83,92XD

Unspecified internal derangement of LEFT knee M23.92

**Total Treatment Time:** 24 min **Timed Code Treatment Minutes:** 

24 min

SUBJECTIVE: Faux

Patient reports that he has 6/10 pain in L knee today. States that he had some soreness from last session in L knee after lateral

## TREATMENT PROGRAM/ INTERVENTIONS

#### 97110 Therapeutic Exercises 15 min

CONTINUED: 5min L LAQs with 3# TO 5# ankle weight with vc for proper technique 5min L quadriceps stretch with 15 second hold and 5min L hamstrings stretch with 15 second hold and

-for improved L knee strength so patient can increase endurance with work tasks that involve lifting and carrying

#### 97112 Neuromuscular Re-Education 9 min

CONTINUED: 4min step up/downs with forward with demo 5min Bosu ball lunges x 4' + 1' with vc for proper technique -to improve core stability with tasks that involve L LE movement

# **ASSESSMENT**

Knother Siram, PTA

Patient did not have any exacerbation of symptoms post session. Needed Min. vc for proper technique during mini lunges to not let knees pass over toes. Pt would continue to benefit from skilled PT to improve L knee strength and mobility during dynamic standing tasks.

# **PLAN**

Continue therapy for reducing impairments and improving functional performance, essential function performance, body mechanics training to prevent exacerbation of injury and increasing weight-bearing activities.

Electronically Signed by: Jonathan Sinanan, PTA - 2145199, 4/12/2024 6:13 PM, Supervised by Dr. Nestor Damian Morales Estrada, PT, DPT