

 <p><b>POLICY LIBRARY: MEDICAL</b></p>	<b>Effective Date:</b>	<b>Approval Date:</b>	<b>Approved By:</b>
	08/07/2008	08/07/2008	MQIC/General Counsel
	<b>Doc. Control #: PRV.MQ.MP.017.001</b>		
	<b>Title/Subject:</b> <b>TMMP 32 - EXPLORATORY OR CONFIRMATORY DIAGNOSTIC EVALUATION</b>		

## 1. Purpose

The purpose of this policy is to determine the validity of clinical value in exploratory or confirmatory diagnostic evaluations for Type I and Type II conditions.

## 2. Statement of Policy

- 2.1. Exploratory or confirmatory diagnostic evaluations outside of the physical examination are of no clinical value for Type II conditions.
- 2.2. Exploratory or confirmatory diagnostic tests may be appropriate in Type I\* conditions and appropriately used prior to the determinations of a treatment plan.

**Note\***: Type I conditions are defined as conditions where there is a strong evidence that the patient's complaints are fully causally related to an underlying physical or mental disease and strong evidence of successful "best practice" treatment. All other conditions are defined as Type II conditions.

## 3. References

- 3.1. Although there is a well documented hierarchy of evidence, the 'best evidence' available is one which can be applied to an individual patient and can be adopted into the clinical decision making process. The absence of 'higher' forms of evidence (e.g., meta-analysis; randomized control trials) does not equate to a lack of evidence, nor should it be extrapolated to conclude that care is not 'evidence based'. This medical policy was established with input from practicing health care providers by a consensus process based on the clinical experience and expert opinion of the members of the Triad Healthcare, Inc.'s, Medical Operations Committee (MOC), Academic Advisory Committee (AAC) & Medical Quality Improvement Committee (MQIC). Should scientific studies or any relevant material become available, please forward the information to Triad Healthcare, Inc. so that the information can be reviewed by the MOC, AAC and the MQIC to determine if a modification of the policy is in order.
- 3.2. Related Triad Medical Policies:
  - [TMMP 18 - Medical Policies](#)

## 4. Attachments

- 4.1. [Provider Manual](#)

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**Table of Revisions**

<b>Revision Date</b>	<b>Modified By</b>	<b>Description</b>
08/07/2008	Level 1, 2, 3	Text reformatted for Policy Library and Document Controls. Purpose and references added.