

Case Number:	CM13-0005881		
Date Assigned:	11/08/2013	Date of Injury:	07/03/2013
Decision Date:	07/31/2014	UR Denial Date:	07/24/2013
Priority:	Standard	Application Received:	08/01/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Board Certified in Physical Medicine and Rehabilitation and is licensed to practice in California. He/she has been in active clinical practice for more than five years and is currently working at least 24 hours a week in active practice. The expert reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

The injured worker is a 32-year-old male who reported an injury after he passed out with heat exhaustion on 07/03/2013. The clinical note dated 07/16/2013 indicated diagnoses of heat exhaustion and possible seizure disorder. The injured worker reported he felt weak. On physical examination, the injured worker's denied headaches, lightheadedness and dizziness. The injured worker denied shortness of breath. The injured worker had no focal weakness, no loss of sensation, or incoordination. The injured worker's gait and station were normal. Deep tendon reflexes were equal. The injured worker had no prior treatments provided within the documentation submitted for review. The provider submitted a request for an MRI of the brain. A request for authorization dated 07/16/2013 was submitted for an MRI of the brain; however, rationale was not provided for review.

IMR ISSUES, DECISIONS AND RATIONALES

The Final Determination was based on decisions for the disputed items/services set forth below:

MRI OF BRAIN, QTY:1.00: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Head, MRI, (magnetic resonance imaging).

Decision rationale: The request for MRI of the brain, qty:1.00 is not medically necessary. The ODG state due to its high contrast resolution, an MRI scans are superior to CT scans for the detection of some intracranial pathology, except for bone injuries such as fractures. An MRI may reveal an increased amount of pathology as compared with CT. Specific MRI sequences and techniques are very sensitive for detecting traumatic cerebral injury; they may include, but are not limited to, diffusion-tensor, gradient echo, and Fluid Attenuated Inversion Recovery (FLAIR). Some of these techniques are not available on an emergency basis. An MRI scans are useful to assess transient or permanent changes, to determine the etiology of subsequent clinical problems, and to plan treatment. An MRI is more sensitive than CT for detecting traumatic cerebral injury. Neuroimaging is not recommended in patients who sustained a concussion/mild TBI beyond the emergency phase (72 hours post-injury) except if the condition deteriorates or red flags are noted. The guidelines state indications for MRI are to determine neurological deficits not explained by CT, to evaluate prolonged interval of disturbed consciousness and to define evidence of acute changes super-imposed on previous trauma or disease. The injured worker had a normal physical exam and neurological exam. In addition, the documentation submitted did not indicate the injured worker has findings of deterioration or any red flags such as infection, tumor, or neural compression. The documentation submitted did not indicate the injured worker had any evidence of acute changes. Therefore the request for MRI of the brain is not medically necessary.