

Case Number:	CM13-0008370		
Date Assigned:	09/09/2013	Date of Injury:	06/13/2012
Decision Date:	01/24/2014	UR Denial Date:	07/31/2013
Priority:	Standard	Application Received:	08/06/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Internal Medicine, and is licensed to practice in the District of Columbia and Maryland. 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 physician 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:

██████████ is a 52 year old woman who was being evaluated for a right elbow injury. Her medical history was significant for hyperlipidemia. Her surgical history was significant for left knee surgery. The date of injury was 06/13/12 and the mechanism was her hitting the lateral aspect of her right elbow on the corner of a wall and then two days later on the corner of a file cabinet. She initially had sharp pain in her right elbow laterally that was radiating up and down her arm and forearm. She also had weakness in her right hand. She reported the injury in August of 2012 and was sent to Concerta health center for an evaluation. There she had an x-ray that showed no fractures. She was treated with oral pain medications and was referred for Physical Therapy. Her subsequent evaluation also included Orthopedic referral, magnetic resonance imaging (MRI) of her elbow and electromyography (EMG) of her bilateral upper extremities. The MRI showed moderate to severe tendinosis of the right common extensor tendon with a superimposed partial tear. On June 12, 2013, she followed up with the treating provider. She had been having ongoing pain in the right elbow, right arm and weakness in the right hand. She had pain with repetitive twisting, reading, lifting, carrying, pulling and pushing. Her pain level was one to two over ten at the least and ten over ten at the worst. On examination she had positive Cozen's sign, tenderness in right elbow and was noted to have limited range of motion in her elbow. Her diagnoses included derangement of the forearm, right elbow sprain and arthropathy of the right hand. A request was made for urine analysis for drug screening.

IMR ISSUES, DECISIONS AND RATIONALES

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

Toxicology-Urine Drug Screen: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Steps to Take Before a Therapeutic Trial of Opioids Page(s): 43, 76-77. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Section Chronic Pain, Urine Drug Testing.

Decision rationale: The MTUS guidelines recommend the use of a urine drug screen to assess for the use or the presence of illegal drugs. According to the ODG, urine drug screening is recommended as a tool to monitor compliance with prescribed substances, identify use of undisclosed substances and uncover diversion of prescribed substances. The test should be used in conjunction with other clinical information when decisions are to be made to continue, adjust or discontinue treatment. In this particular scenario, the employee had ongoing right elbow pain. But there is no documentation provided of a plan for initiating Opioids or chronic Opioid use. Hence the request for urine drug screen is not medically necessary.