

<b>Case Number:</b>	CM13-0012731		
<b>Date Assigned:</b>	11/06/2013	<b>Date of Injury:</b>	07/27/2009
<b>Decision Date:</b>	01/17/2014	<b>UR Denial Date:</b>	07/23/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/12/2013

### 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 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 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:

54 year-old male with injury from 7/27/09, suffers from chronic neck pain per Utilization Review (UR) letter but this letter also has lumbar spine as body part. Utilization review letter from 7/11/13 denied the request stating that the medical records submitted did not contain any significant recent changes in the patient's condition. Hand-written reports from 8/7/13 and 9/4/13 by [REDACTED] is reviewed. Neither of the reports discuss Somato-sensory evoked potential (SSEP) study request. The discussion is about RF ablation of the lumbar facet joints. The 8/7/13 report simply states that a report is being re-sent with his request for SSEP's, and MRI. Diagnosis is cervical stenosis and plan is MRI/SSEP-see typed report. 10/4/13 report is a request for RF ablation. The doctor states, "my 9/4/13 RFA and fx for request for (RF) ablation has not been responded to." 9/4/13 hand-written report states discussed RF for lumbar facets, pt had great results from facet block but very short lasting. 7/11/13 report by [REDACTED] shows that the patient had an MRI C-spine done with varying degrees of foraminal stenosis, severe central stenosis at C5-6 and 6-7. The patient's symptoms include frequent falls that are increasing in number, neck and arm symptoms, increasing difficulties with use of his hands, but no bowel or bladder problems. Pt. has erectile dysfunction. Exam showed weakness of the arms, atrophy of intrinsic hand muscles. Proprioception was impaired but normoreflexic. He recommended another MRI to compare as he was concerned about myelopathy, and SSEP. Pt. may require decompressive surgery.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Somatosensory Evoked Potentials (SSEP): Overturned**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): Table 2, Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Neck and Upper Back and Section: Pain.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Somatosensory evoked potential guidelines

**Decision rationale:** Recommendation is for authorization of the request SSEP studies based on the patient's balance problems with falls, weakness in the arms and MRI findings of severe spinal stenosis at multiple levels with potential myelopathy. While MTUS and ACOEM do not discuss SSEP in the context of myelopathy, ODG guidelines supports it for diagnostic purposes to determine subtle myelopathies.