

Case Number:	CM13-0015225		
Date Assigned:	12/27/2013	Date of Injury:	08/02/2009
Decision Date:	03/10/2014	UR Denial Date:	08/02/2013
Priority:	Standard	Application Received:	08/22/2013

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 Orthopedic Surgery, 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:

The patient is a 61-year-old gentleman, who injured his low back while lifting a tray full of plates at work on 08/02/09. The records provided for review indicated that the claimant had undergone a laminectomy in 2010 followed by an interbody fusion in 2012 and had with continued complaints of pain. The most recent clinical assessment for review was dated 11/14/13 by the provider. The assessment documented continued complaints of discomfort about the low back and pelvic region on the left. Objective findings on examination showed 5/5 motor strength with the exception of 4/5 of the left quadriceps with diminished sensation bilaterally to the thighs. Radiographs reviewed on that date showed hardware to be intact with no evidence of migration. The patient was diagnosed with postlaminectomy syndrome and stenosis and the recommendation was made for electrodiagnostic studies of the bilateral lower extremities and an MRI (magnetic resonance imaging) scan of the pelvis.

IMR ISSUES, DECISIONS AND RATIONALES

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

EMG/NCS B/L LE: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303.

Decision rationale: Based on the California ACOEM guidelines, the request for electrodiagnostic studies in this case would not be indicated. The claimant's clinical imaging indicates a significant prior surgical history and with serial examination findings demonstrating continued quadriceps weakness throughout 2013 since the time of the last surgical procedure. There is no documentation of a change or new examination findings. In absence of documentation of a new clinical finding or complaint, the role of electrodiagnostic studies at this stage in the claimant's chronic postoperative course of care would not be indicated.

MRI of the pelvis without contrast: Upheld

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

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

Decision rationale: The California MTUS Guidelines are silent. When looking at Official Disability Guidelines (ODG) criteria for the requested MRI (Magnetic resonance imaging), the claimant does not meet the clinical criteria for an MRI scan of the hip or pelvic region. The medical records do not indicate formal physical examination findings, recent injury, trauma, or a complaint that would be indicative of need of a pelvic MRI workup. This specific request in this case would not be supported as medically necessary.