

Case Number:	CM13-0015279		
Date Assigned:	10/08/2013	Date of Injury:	06/15/2011
Decision Date:	03/12/2014	UR Denial Date:	08/07/2013
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 Internal Medicine 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 beneficiary is a 42 year old male who presents for a date of injury of 6/15/11. He has chronic low back pain with pain radiating into his leg. He has use NSAID and in June 2013 he had a lumbar blood patch performed for persistent post epidural injection headache and disorientation. He had no complications with the epidural procedure, no hematoma and no immediate post headache. He persisted with the headache for a three week period at which point a "blood patch" was prescribed. He had been on Duexis (ibuprofen and pepcid). He also became anxious and was given Ativan. The beneficiary seeks lumbar patch for post epidural headache.

IMR ISSUES, DECISIONS AND RATIONALES

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

Decision for lumbar blood patch/based on the submitted medical records, lumbar blood patch the is not medically necessary: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Boonmak P, Boonmak S. Epidural blood patching for preventing and treating post-dural puncture headache. Cochrane Database Syst Rev 2010; :CD001791. van Kooten F, Oedit R, Bakker SL, Dippel DW. Epidural blood patch in post dural puncture headache: a randomised, ob

Decision rationale: The beneficiary had no complications of subdural hematoma post epidural injection procedure. He developed a headache over a week post procedure. The lumbar patch was prescribed at three weeks post procedure. There is efficacy to blood patch within 24 hours to a week for relief of headache. There is no evidence for the use of a blood patch at the three weeks post procedure. There is no medical necessity for the blood patch. MTUS is silent on this topic. See above references.

Decision for complete metabolic panel/ the request for a lumbar blood patch is not necessary, thus the request is not applicable: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Boonmak P, Boonmak S. Epidural blood patching for preventing and treating post-dural puncture headache. Cochrane Database Syst Rev 2010; :CD001791. van Kooten F, Oedit R, Bakker SL, Dippel DW. Epidural blood patch in post dural puncture headache: a randomised, ob

Decision rationale: The blood patch as noted above is medically not necessary. Any associated blood work is also medically not necessary. There is no indication in the medical record for other reasons to obtain this blood work. The laboratory tests are medically not necessary

Decision for C-reactive protein/ the request for a lumbar blood patch is not necessary, thus the request is not applicable: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Boonmak P, Boonmak S. Epidural blood patching for preventing and treating post-dural puncture headache. Cochrane Database Syst Rev 2010; :CD001791. van Kooten F, Oedit R, Bakker SL, Dippel DW. Epidural blood patch in post dural puncture headache: a randomised, ob

Decision rationale: The blood patch is medically not necessary. The blood work associated with it is not medically necessary. There appears to be no other indication for the requested laboratory tests. The laboratory tests are medically not necessary.

Decision for sed.rate/ the request for a lumbar blood patch is not necessary the thus the request is not applicable: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Boonmak P, Boonmak S. Epidural blood patching for preventing and treating post-dural puncture headache. Cochrane Database Syst Rev 2010; :CD001791. van Kooten F, Oedit R, Bakker SL, Dippel DW. Epidural blood patch in post dural puncture headache: a randomised, ob

Decision rationale: There is no medical indication for the blood patch and any associated laboratory tests. No other indication for the laboratory tests per the medical record.