

Case Number:	CM13-0016474		
Date Assigned:	11/06/2013	Date of Injury:	11/05/2010
Decision Date:	01/24/2014	UR Denial Date:	08/01/2013
Priority:	Standard	Application Received:	08/26/2013

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:

The patient is a 38-year-old female who reported a work-related injury on 11/05/2010, specific mechanism of injury not stated. The patient presented for treatment of the following diagnoses: cervical strain and lumbar strain. An MRI of the lumbar spine dated 05/08/2012, signed by [REDACTED] revealed (1) loss of intervertebral disc height seen at the L5-S1 level with straightening of the normal lumbar spine lordosis; no prevertebral soft tissue abnormality was seen; (2) at the L5-S1 level, an annular concentric slightly more to the left than right 2.2 mm broad-based disc protrusion was seen flattening the anterior portion of the thecal sac with mild bilateral neural foraminal stenosis. There was no extrusion or sequestration of the disc material and no spinal stenosis. The most recent physical exam of the patient was dated from 01/28/2013, evidencing medical clearance of the patient by [REDACTED]; the patient was an operative candidate for her cervical spine pain complaints. The provider documented that the patient utilized Neurontin, baclofen, bupropion, fluoxetine, topiramate, ranitidine, ibuprofen, Flonase, Zyrtec, Align, ketoprofen, Voltaren and guaifenesin. The provider documented that upon physical exam of the patient, the patient had 2+ reflexes throughout; motor strength was noted to be 5/5 throughout. There were no focal motor-sensory deficits upon exam of the patient per the provider. The provider documented that the patient presented with an injury at C5-6 and diagnoses of fibromyalgia and depression.

IMR ISSUES, DECISIONS AND RATIONALES

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

A MRI of the lumbar spine: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints.

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

Decision rationale: The clinical notes fail to evidence a recent thorough physical exam of the patient documenting any red flag findings, such as any motor, neurological or sensory deficits or any documentation of the patient specifically utilizing conservative treatment for her lumbar spine pain complaints. The current request is rendered an adverse determination as the California MTUS/ACOEM indicate, "Unequivocal findings that identify specific nerve compromise on the neurologic examination are sufficient evidence to warrant imaging studies if symptoms persist. When the neurologic examination is less clear, however, further physiologic evidence of nerve dysfunction can be obtained before ordering an imaging study. The clinical notes do not evidence that the patient presents with any significant change in condition since the last MRI of the lumbar spine, performed in 05/2012. Given all of the above, the request for an MRI of the lumbar spine is not medically necessary or appropriate