

Case Number:	CM13-0018507		
Date Assigned:	02/05/2014	Date of Injury:	07/19/2012
Decision Date:	06/10/2014	UR Denial Date:	08/08/2013
Priority:	Standard	Application Received:	08/29/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Board Certified in Chiropractic, 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 expert 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 45 year old female employee of [REDACTED] who has submitted a claim for chronic cervical and lumbar strain/sprain, and left SI dysfunction associated with an industrial injury of July 18, 2012. Treatment to date includes topical and oral analgesics, muscle relaxants, a home exercise program, physical therapy, and chiropractic therapy. Medical records from 2012-2013 were reviewed, showing persistent neck and back pain with headaches and radicular pain to both lower extremities. A progress report from August 1, 2013 states that the patient reported episodes of excessive sweating, feeling ill, and withdrawal symptoms from lack of medications. The patient continued with Butrans 10, which reduced her pain level and allowed to her to complete her activities of daily living; Amrix, which improved muscle spasms; Topamax, which controlled headaches at 50mg twice daily; and Lyrica, which decreased her level of shaking. The patient reported no other side effects/abusive behaviors. The patient was able to transfer from sitting to standing without assistance. There is antalgic gait on ambulation due to left side pain. There is limited range of motion of the neck and shoulder. Muscle strength was 5/5 on the right and 4/5 on the left lower extremity with functional range of motion, but with decreased sensation to light touch. Tenderness was noted on the cervical and lumbar spinous processes. The patient was diagnosed with left SI joint dysfunction, and chronic cervical and lumbar sprain/strain. Medications include Butrans patch 10mcg/hr, one patch per seven days for around-the-clock pain control; Lyrica 100mg, 2 tablets twice a day for neuropathic pain; Amrix 15mg, 1-3 tablets every day at bedtime for muscle spasms; and Topamax 25mg, 2 twice a day for headaches. The patient had chiropractic and physical therapy in 2012 which controlled headaches, thus reducing medication use and improved the ability to complete her activities of daily living. Overall specific functional gains and pain improvement were not mentioned.

IMR ISSUES, DECISIONS AND RATIONALES

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

SIX (6) CHIROPRACTIC SESSIONS FOR CERVICAL SPINE.: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 58-59.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 58-59.

Decision rationale: As noted in page 58 and 59 of the Chronic Pain Medical Treatment Guidelines, objective functional improvement must be documented to support the request for additional chiropractic treatments. In this case, the patient previously had an unspecified number of chiropractic therapy sessions; however, there was no evidence of objective functional improvement. As such, additional chiropractic therapy cannot be recommended as medically necessary.