

Case Number:	CM13-0021107		
Date Assigned:	10/11/2013	Date of Injury:	06/06/2011
Decision Date:	02/10/2014	UR Denial Date:	08/05/2013
Priority:	Standard	Application Received:	08/19/2013

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 Diagnostic Radiology 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.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This is a thirty one year old patient with a remote date of injury of June 6, 2011. The injury was a fall from a roof, with multiple fractures and injuries, including a low back injury. There is no documented back pain until 2013 with radiation to left leg and numbness into the left calf. A lumbar magnetic resonance imaging (MRI) test from August 27, 2013 revealed L4-5 and L5-S1 disc bulge with mild narrowing of L5-S1 neural foramina.

IMR ISSUES, DECISIONS AND RATIONALES

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

EMG/NCS BLE for lower back: Overturned

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): 287-315.

Decision rationale: Electromyography (EMG), including H-reflex tests, may be useful to identify subtle, focal neurologic dysfunction in patients with low back symptoms lasting more than three or four weeks (ACOEM Practice Guidelines, 2nd Edition (2004), Chapter 12) pg 303. The patient's symptoms do meet these guidelines.