

Case Number:	CM13-0022600		
Date Assigned:	11/13/2013	Date of Injury:	04/08/2009
Decision Date:	02/03/2014	UR Denial Date:	08/28/2013
Priority:	Standard	Application Received:	09/10/2013

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 Oklahoma and Texas. 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 55-year-old male who reported an injury on 04/08/2009 resulting in 2 back surgeries to include the most recent 3 level lumbar fusion. The fusion resulted in abdominal complications to include chronic constipation and inability to urinate. The patient's symptoms were treated with medications with no symptom relief. The patient was evaluated by urologist on 04/29/2013 where several studies were recommended to assist in determining the patient's urinary dysfunction etiology. The patient was also evaluated by a gastrointestinal specialist who also advised the patient to limit narcotic intake, increase daily fluids, and decrease laxative usage. It was also recommended that the patient undergo other diagnostic procedures to determine the patient's etiology. The patient's diagnoses included urinary and bowel complications after surgery. The patient's treatment plan included a barium swallow, cystogram, colonoscopy, prostate sonography, renal sonography, and several laboratory diagnostic tests and genetic testing to determine the patient's ability to tolerate narcotic usage.

IMR ISSUES, DECISIONS AND RATIONALES

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

Urine Toxicology: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Pain Chapter, Urine Drug Testing (UDT).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug Testing Page(s): 4.

Decision rationale: The clinical documentation submitted for review does provide evidence that the patient has successfully weaned himself from all narcotics. California Medical Treatment Utilization Schedule recommends random drug screening for patients who need to be monitored for aberrant behavior or are suspected to be participating in illicit street drug use. The clinical documentation submitted for review does not provide any evidence that the patient is on medications that require monitoring for aberrant behavior and there is no documentation that the patient is symptomatic to support illicit street drug use. As such, the requested urine toxicology is not medically necessary or appropriate.

(GI) Gastrointestinal Evaluation: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), ACOEM Guidelines, Page 127.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) 6, page(s) 163.

Decision rationale: The requested gastrointestinal evaluation is not medically necessary or appropriate. The clinical documentation submitted for review does provide evidence that the patient was assessed by a gastrointestinal specialist. American College of Occupational and Environmental Medicine recommend specialty consultation when a patient's diagnosis is complex and would benefit from additional expertise of a specialist. The clinical documentation submitted for review does provide evidence that the patient has a complex postsurgical diagnosis. However, as the previous gastrointestinal evaluation recommended several diagnostic studies to assist in determining the patient's etiology of gastrointestinal dysfunction and these results were not provided for review, an additional gastrointestinal evaluation would not be supported. As such, the requested gastrointestinal evaluation is not medically necessary or appropriate.

Urology Consult: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Page(s): 127.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) 6, page(s) 163.

Decision rationale: The requested urology consult is not medically necessary or appropriate. The clinical documentation submitted for review does provide evidence that the patient was assessed by a gastrointestinal specialist. American College of Occupational and Environmental Medicine recommend specialty consultation when a patient's diagnosis is complex and would

benefit from additional expertise of a specialist. The clinical documentation submitted for review does provide evidence that the patient has a complex postsurgical diagnosis. However, as the previous gastrointestinal evaluation recommended several diagnostic studies to assist in determining the patient's etiology of gastrointestinal dysfunction and these results were not provided for review, an additional gastrointestinal evaluation would not be supported. As such, the requested urology consult is not medically necessary or appropriate