

Case Number:	CM13-0022867		
Date Assigned:	01/24/2014	Date of Injury:	04/30/2013
Decision Date:	04/22/2014	UR Denial Date:	08/09/2013
Priority:	Standard	Application Received:	09/11/2013

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 Physical Medicine & 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 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 30 YO male with date of injury of 04/30/2013. The listed dianosis per [REDACTED] dated 07/31/2013 is: 1. Sprain/strain of lumbar region According to progress report dated 07/31/2013 by [REDACTED], the patient presents with worse back pain. He states that he had a flare-up over the weekend. He does not report any recent trauma. He reports intermittent lumbar pain radiating towards the right inguinal area and occasionally towards the right foot. The treater reviewed an x-ray of the thoracic/lumbar region and mentions the report shows DJD. Objective findings show minor tenderness in the lumbar paraspinals. His range of motion is significantly decreased with only 20% of full range. The treater is requesting and MRI of the lumbar spine.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI OF THE LUMBAR SPINE: Upheld

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

MAXIMUS guideline: Decision based on MTUS ACOEM Page(s): 303. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES (ODG) ODG-TWC GUIDELINES ([HTTP://WWW.ODG-TWC.COM/ODGTWC/LOW_BACK.HTM#PROTOCOLS](http://www.odg-twc.com/odgtwc/low_back.htm#protocols)) HAS THE FOLLOWING:

Decision rationale: The Expert Reviewer's decision rationale: This patient presents with back pain. The treater is requesting an MRI of the lumbar spine. Utilization review dated 08/09/2013 denied the request stating that "(T)here is no documentation of any neurologic deficits or red flags on exam. Additionally, the documentation indicates that the patient found therapy to be helpful." ACOEM Guidelines page 177 to 178 list their criteria for ordering imaging studies which include emergence of a red flag; physiologic evidence of tissue insult or neurologic dysfunction; failure to progress in a strengthening program intended to avoid surgery and clarification of the anatomy prior to an invasive procedure. ACOEM further states that unequivocal findings that identify specific nerve compromise on the neurologic examination are sufficient evidence to warrant imaging studies if symptoms persist. Review of 85 pages of records do not show any recent or prior MRI. ODG guidelines also state that for uncomplicated low back pain, prior lumbar surgery, radiculopathy, cauda equina syndrome needs to be documented for an MRI. In this case, progress report dated 07/31/2013 by [REDACTED], shows only minor tenderness in the lumbar paraspinals; negative straight leg raise and hip exam was unremarkable. Presenting symptoms include low back pain with only occasional radiation towards the right foot. Given the lack of a clear neurologic deficit such as significant leg symptoms, positive examination suggestive of radiculopathy, the guidelines do not support an MR imaging. Recommendation is for denial.