

Case Number:	CM13-0023367		
Date Assigned:	11/15/2013	Date of Injury:	06/02/2009
Decision Date:	01/09/2014	UR Denial Date:	08/13/2013
Priority:	Standard	Application Received:	09/12/2013

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 records describe a 60 year-old male that injured his left shoulder and lower back on 6/2/09. There is prior history of C5-7 fusion from 1993 and more recently fusion from C3-5 on 4/10/13. On the 8/2/13 report, the patient's neurosurgeon is recommending the pain management referral to see if the pain levels can be brought down further, as there is still significant tenderness despite the use of Soma, Percocet and recent restart of NSAIDs.

IMR ISSUES, DECISIONS AND RATIONALES

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

Referral to a Pain Management specialist for the cervical spine: Upheld

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

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

Decision rationale: The neurosurgeon performed the C3-5 fusion and has the patient on Percocet, Soma and NSAIDs. The patient was reported to have significant tenderness in the cervical spine despite the medications and the neurosurgeon wanted a pain management consultation to see if the pain could be brought down further. The ACOEM guidelines state a consultation can be made "when the plan or course of care may benefit from additional expertise." The pain management consultation is in accordance with ACOEM guidelines.