

<b>Case Number:</b>	CM13-0024786		
<b>Date Assigned:</b>	11/20/2013	<b>Date of Injury:</b>	07/27/2008
<b>Decision Date:</b>	01/13/2014	<b>UR Denial Date:</b>	09/03/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/16/2013

### 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 Orthopedic Surgery 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:

The patient is a 54-year-old gentleman injured in a work related accident on 07/27/08. Clinical records for review include a recent operative report of 03/26/13 indicating that the claimant underwent a left carpal tunnel release procedure. The postoperative assessment by [REDACTED] 07/29/13 gave subjective complaints of left knee and left wrist pain specific to the left wrist that describes previous surgical process and current musculoskeletal complaints of improved range of motion since time of surgery with slight swelling and the continued inability to lift heavy objects. Physical examination findings at that date demonstrated significantly restricted Jamar grip testing at 10, 10, and 14 on the left compared to 27, 30, and 22 on the right. Further evaluation to the wrist is not documented. The claimant's diagnosis at that date was of bilateral carpal tunnel syndrome per electrodiagnostic studies in 2007 status post carpal tunnel release April of 2013. The plan at that time was for repeat electrodiagnostic testing as well as monofilament testing to the upper extremities for further assessment.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**EMG/NCV of bilateral upper extremities:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG, Electrodiagnostic testing (EMS/NCS) and American Association of Neuromuscular & Electrodiagnostic Medicine (AANEM)..

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 178. Decision based on Non-MTUS Citation American Association of Neuromuscular & Electrodiagnostic Medicine (AANEM)..

**Decision rationale:** Based on California ACOEM Guidelines, bilateral electrodiagnostic studies to the upper extremities would not be supported. While the claimant continues to be with difficulty with weakness following surgical process, there are no documented findings of a neurologic nature that would necessitate the reason for repeat electrodiagnostic studies. Absence of physical examination findings would fail to necessitate the role of the proposed testing. It should be noted that the claimant has not undergone any degree of surgical process to the right wrist, which is with previously documented carpal tunnel syndrome on electrodiagnostic studies.

**Semmes-Weinstein testing of both upper extremities:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 178. Decision based on Non-MTUS Citation The American Association of Neuromuscular & Electrodiagnostic Medicine (AANEM)..

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 257-258. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG)--Official Disability Guidelines Treatment in Worker's Comp , 18th Edition, 2013 Updates: carpal tunnel procedure - Semmes-Weinstein monofilament test..

**Decision rationale:** CA MTUS ACOEM with respect to examination states, "The neurologic and vascular status of the hand, wrist, forearm, and elbow, including peripheral pulses, and the motor, reflex, and sensory status of the forearm, hand, and wrist as well as the more proximal surrounding structures, can be assessed". Official Disability Guidelines specifically address the testing and while monofilament testing can be recommended as a diagnostic tool for carpal tunnel syndrome, the claimant's physical examination demonstrated weakness with grip strength, which in and of itself is not indicative of carpal tunnel syndrome. The claimant has previously undergone release of the left carpal tunnel with clear documentation of the diagnosis with electrodiagnostic studies. The need for monofilament testing at this stage in clinical course is not supported.