Case Number:	CM13-0024888		
Date Assigned:	11/20/2013	**Date of Injury:**	05/31/2012
Decision Date:	01/24/2014	**UR Denial Date:**	09/09/2013
Priority:	Standard	**Application Received:**	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 Family Practice 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 34 year old male claimant who sustained an electrical injury on 5/31/12 that resulted in 11% body surface area burns. In the ER, he received IV fluids and routine burn care. On 6/4/12, he received split thickness skin xenografts to the burned areas on the arms, chest, and left leg. He had further surgery on 6/8/12 for wound excision and grafting. After surgery, he received scar therapy manipulation.

IMR ISSUES, DECISIONS AND RATIONALES

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

laser treatment for keloid formation from burns: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lasers Med Sci. 2013 May;28(3):957-64. DOI: 10.1007/s10103-012 1178-0. Epub 2012 Aug 21. Clinical and histologic effects from CO2 laser treatment of keloids.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Plast Reconstr Surg. 2013 Dec;132(6):1747-58. doi: 10.1097/PRS.0b013e3182a97e43. Laser therapy for prevention and treatment of pathologic excessive scars. Jin R, Huang X, Li H, Yuan Y, Li B, Cheng C, Li Q.; Br J Dermatol. 2013 Oct;169 Suppl 3:71-81. doi: 10.1111/b

Decision rationale: There are no treatment guidelines suggested in the MTUS or ACOEM for keloids. According to an article noted above and published in Plastic Reconstructive Surgery:

"The level of evidence for laser therapy as a keloid treatment is low. Further research is required to determine the mechanism of action for different laser systems and to examine the efficacy in quantifiable parameters, such as scar erythema, scar texture, degrees of symptom relief, recurrence rates, and adverse effects. "According to a study in the British Journal of Dermatology: "...there is a lack of robust, randomized, level-one, evidence-controlled trials evaluating these treatment options. " According to the AAFP: "The effectiveness of this therapy (laser) remains controversial, however, with other studies showing insignificant reduction in scar thickness. Based on the lack of evidence or indication of other failed treatments such as steroid injections, laser treatment is not medically necessary.