

Case Number:	CM13-0033966		
Date Assigned:	12/06/2013	Date of Injury:	08/26/2008
Decision Date:	07/23/2014	UR Denial Date:	09/26/2013
Priority:	Standard	Application Received:	10/11/2013

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 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 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 52-year-old female admitting clerk sustained an industrial injury on 8/26/08 due to a slip and fall. Past medical history was positive for anemia. She was status post L3-S1 posterior lumbar interbody fusion on 3/18/11. She underwent L3-S1 removal of bilateral lumbar spinal hardware, bilateral inspection of fusion, extensive excision of scar tissue, bilateral nerve root exploration with lysis of epidural adhesions/epineurolysis, and re-grafting of pedicle screw holes/lateral gutter using demineralized bone matrix augment with iliac crest marrow on 10/26/12. The 9/26/13 utilization review denied the retrospective request for cell saver use and technical support based on the lack of supportive medical evidence for use of the cell saver device during elective spinal surgery.

IMR ISSUES, DECISIONS AND RATIONALES

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

RETROSPECTIVE USAGE OF A CELL SAVER/CELL SAVER TECHNICAL ASSISTANCE DOS: 10/26/12: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Spine (Phila Pa 1976) Blood Loss In Major Spine Surgery: Are There Effective Measures To Decrease Massive Hemorrhage In Major Spine Fusion Surgery?.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Elgafy H, Bransford RJ, McGuire RA, Dettori JR, Fischer D. Blood Loss In Major Spine Surgery: Are There Effective Measures To Decrease Massive Hemorrhage In Major Spine Fusion Surgery? Spine (Phila Pa 1976). 2010 Apr 20;35(9 Suppl):S47-56.

Decision rationale: The California MTUS and Official Disability Guidelines are silent regarding the use of cell saver. Current peer-reviewed literature stated that significant hemorrhage and associated comorbidities in spinal fusion surgery have not been clearly identified. The effectiveness and safety of intraoperative techniques, such as cell saver, is uncertain. On the basis of the current literature, there is little support for routine use of cell saver during elective spinal surgery. There is no compelling reason to support the medical necessity of cell saver for this patient relative to increased risk factors for hemorrhage. Therefore, this request for cell saver is not medically necessary.