

<b>Case Number:</b>	CM13-0037240		
<b>Date Assigned:</b>	12/13/2013	<b>Date of Injury:</b>	02/08/2012
<b>Decision Date:</b>	02/20/2014	<b>UR Denial Date:</b>	09/03/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/27/2013

### 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 Internal Medicine, has a subspecialty in Cardiology, and is licensed to practice in Texas. 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 39-year-old who reported a work-related injury on 02/28/2012 after result of being jostled in a seat while loading a trailer utilizing a forklift. The patient subsequently was diagnosed with cervical and lumbar disc bulging. The patient had previously undergone imaging of the cervical spine and lumbar spine on 06/08/2012. The clinical note dated 09/24/2013 reports the patient was seen under the care of [REDACTED]. Electrodiagnostic studies performed of the bilateral upper extremities dated 10/10/2013 signed by [REDACTED] revealed evidence of a moderate bilateral carpal tunnel syndrome. The provider documents the patient continues to present with pain complaints to the cervical spine and low back. The provider recommended the patient undergo imaging studies of the cervical spine and 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 without contrast:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints.

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

**Decision rationale:** The Physician Reviewer's decision rationale: The clinical notes failed to evidence the patient presents with significant change in condition since imaging of the lumbar spine that were last performed in 06/2012. The clinical notes document the patient presents with

no significant evidence of any motor, neurological, or sensory deficits. In addition, the last clinical note dated 09/24/2013 did not provide head to toe assessments of the patient's objective findings of symptomatology. The Low Back Complaints Chapter of the ACOEM Practice Guidelines indicates when the neurologic examination is less clear, further physiologic evidence of nerve dysfunction can be obtained before ordering an imaging study. The records show a lack of a thorough physical exam of the patient evidencing significant change in condition or any motor, neurological, or sensory deficits upon exam. The request for one MRI of the lumbar spine without contrast is not medically necessary or appropriate.

**MRI of the cervical spine without contrast:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 178.

**Decision rationale:** The Physician Reviewer's decision rationale: The clinical notes failed to evidence the patient presents with significant change in condition since imaging of the cervical spine that were last performed in 06/2012. The clinical notes document the patient presents with no significant evidence of any motor, neurological, or sensory deficits. In addition, the last clinical note dated 09/24/2013 did not provide head to toe assessments of the patient's objective findings of symptomatology. The Neck and Upper Back Complaints Chapter of the ACOEM Practice Guidelines indicates when the neurologic examination is less clear, further physiologic evidence of nerve dysfunction can be obtained before ordering an imaging study. The records show a lack of a thorough physical exam of the patient evidencing significant change in condition or any motor, neurological, or sensory deficits upon exam. The request for one MRI of the cervical spine without contrast is not medically necessary or appropriate.