

Case Number:	CM13-0038594		
Date Assigned:	12/18/2013	Date of Injury:	08/09/2013
Decision Date:	02/14/2014	UR Denial Date:	10/14/2013
Priority:	Standard	Application Received:	10/25/2013

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 Pulmonary Disease 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 patient is a 40-year-old male who reported an injury on 08/14/2013. According to the documentation, the patient was reportedly exposed to epoxy on 08/09/2013 and developed a severe sore throat. The patient stated he had been exposed 2 times before and lost his voice. He had no prior history of allergies, and was given prednisone but it apparently had no effect. The patient underwent a laryngoscopy which revealed edema of the arachnoids but no erythema was noted. Examination also revealed severe septal deviation to the left and turbinates were +4 hypertrophic.

IMR ISSUES, DECISIONS AND RATIONALES

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

Internal Medicine consultation for toxicology: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, Chapter 7, pg. 127

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 89-92.

Decision rationale: According to California MTUS/ACOEM it states that referrals may be appropriate if the practitioner is uncomfortable with the line of inquiry, when treating a particular

cause of delayed recovery, or has difficulty obtaining information or agreement to a treatment plan. The goal of such an evaluation is, in fact, functional recovery and return to work. In the case of this patient, because he was exposed to a toxic substance, and has had ongoing respiratory issues post injury, consultation with an internal medicine specialist would be considered appropriate in helping the patient to diagnose his symptoms properly as well as helping to expedite his recovery with proper treatment procedures. As such, the requested service is deemed medically appropriate and is certified.

MD referral for meds: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, Chapter 7, pg. 127

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 89-92.

Decision rationale: According to California MTUS/ACOEM, it states that referrals may be appropriate if the practitioner is uncomfortable with the line of inquiry, when treating a particular cause of delayed recovery, or has difficulty obtaining information or agreement to a treatment plan. In the case of this patient, he is being treated by his primary care provider and has also been referred to an allergist. However, it is unclear as to the medical necessity for a referral to an MD for meds when a primary care physician could be providing the same service. Without having sufficient documentation indicating the medical necessity for an MD referral for meds, at this time the requested service cannot be warranted and is non-certified.