

Case Number:	CM13-0041036		
Date Assigned:	12/20/2013	Date of Injury:	02/29/2012
Decision Date:	02/12/2014	UR Denial Date:	10/15/2013
Priority:	Standard	Application Received:	10/29/2013

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 Physical Medicine & Rehabilitation, has a subspecialty in Interventional Spine 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:

This is a 37 year-old female probation correctional officer with a 2/29/2012 industrial-related MVA involving traumatic brain injury, spinal cord injury and depression. She underwent cervical fusion on 4/4/12.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective/Prospective usage of Celexa 20mg: Overturned

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines
Antidepressants for chronic pain: Selective serotonin reuptake inhibitors (SSRIs), a class of a.

Decision rationale: Page 109 of the psychological evaluation by [REDACTED] recommended psychotherapy and evaluation with a psychiatrist to see if psychotropic medications would be of benefit. The 7/10/13 report from [REDACTED] notes the patient is using Tylenol 500mg, gabapentin, Motrin, Celexa and Antivert. The 8/19/13 report from [REDACTED] states the patient is "feeling close to the "old-self"" This would suggest improvement. MTUS recommends SSRIs

for treatment of depression associated with chronic pain. The request for use of Celexa appears to be consistent with MTUS guidelines.