MAXIMUS Federal Services

Case Number:	CM13-0045102		
Date Assigned:	12/27/2013	Date of Injury:	08/30/2012
Decision Date:	04/04/2014	UR Denial Date:	10/17/2013
Priority:	Standard	Application Received:	10/30/2013

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 and is licensed to practice in New York. 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 47-year-old female with a date of injury on 06/30/2012. She sustained an injury to her neck, hips, and back. A car smashed through the window in the store that she was working in, pinning her between the freezer and counter. She was not hit by the car, but was pushed back into the counter. She did not fall. She had right hip pain and back pain. She was evaluated in the Emergency Room (ER) and sent home. She has degenerative disease of her cervical, thoracic and lumbar spine. On 08/31/2012 she had a left renal stone and multiple smaller right renal stones on CAT scan. On 12/13/2012 she had an office visit with an urologist for microscopic hematuria and renal stones. She was told she had renal stones eighteen (18) years earlier. On 11/18/2013, the listed diagnosis was cervical strain/sprain, thoracic sprain/strain and lumbar strain/sprain. Naproxen was continued. On 12/16/2013, she had routine tenderness to palpation of the cervical, thoracic and lumbar spine. The range of motion was decreased. The muscle strength was 5/5. Nerve root compression signs were not present. Naproxen was continued.

IMR ISSUES, DECISIONS AND RATIONALES

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

Cystoscopy, ureteral stent, and extracorporeal shockwave lithotripsy: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation eMedicine article titled "Extracorporeal Shockwave Lithotripsy Treatment & Management"

(http://emedicine.medscape.com/article/444554-treatment), and the American Urological Association Stone Guidelines Panel (http://emedicine.medscape.com/article/444554-overview#a

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Campbell - Walsh Urology, 10th Edition. 2011.

Decision rationale: This is not a condition related to the injury at work. The claimant had renal stones eighteen (18) years prior to her urology consultation in 12/2012. There is no documentation that the injury caused the renal stones present years prior to the injury or in any way exacerbated her stones. As noted in the previous review by an urologist, there is no specific reason why the requested treatment of the stones are required at this time. There is no documentation of renal failure or progressive renal disease. There is no documentation of any symptoms from the renal stones. Microscopic hematuria is not a reason for treatment of the stones. She does not work at a job where emergency care for stones is not available or is dangerous. She has had this condition for close to two decades. There is no indication for treatment at this time.