MAXIMUS Federal Services

Case Number:	CM13-0049933		
Date Assigned:	12/27/2013	Date of Injury:	01/14/2013
Decision Date:	03/06/2014	UR Denial Date:	10/28/2013
Priority:	Standard	Application Received:	11/08/2013

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 Family Practice, 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 46-year-old male who reported injury on 1/14/13. The mechanism of injury was a motor vehicle accident. The patient did not have tenderness to palpation of the cervical spine. The reflexes were noted to be 2/4 in the biceps, triceps, and brachioradialis bilaterally. The Adson's test was noted to be positive. The Spurling's maneuver was noted to cause pain radiating to the bilateral upper extremities. The patient's diagnoses included cervical radiculopathy.

IMR ISSUES, DECISIONS AND RATIONALES

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

request for an MRI of the cervical spine without contrast: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints,Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 177-179.

Decision rationale: ACOEM Guidelines indicate that the criteria for ordering imaging studies are emergence of a red flag, physiologic evidence of tissue insult or neurologic dysfunction, failure to progress in a strengthening program intended to avoid surgery, and clarification of anatomy prior to an invasive procedure. Additionally, guidelines indicate that physiologic evidence may be in the form of definitive neurologic findings on physical examination,

electrodiagnostic studies, laboratory studies, or bone scans. Unequivocal findings that identify specific nerve compromise on the neurologic examination are sufficient evidence to warrant imaging studies if symptoms persist. The clinical documentation submitted for review indicated the patient had a positive Adson's test and the deep tendon reflexes were noted to be normal. The patient was noted to have a Spurling's maneuver that caused pain radiating to the bilateral upper extremities. However, there was a lack of documentation of dermatomal or myotomal findings to support the necessity for the requested test. Given the above, the request for MRI of the cervical spine without contrast is not medically necessary.