

| | | | |
|-----------------------|--------------|------------------------------|------------|
| Case Number: | CM13-0058346 | | |
| Date Assigned: | 12/30/2013 | Date of Injury: | 05/28/2010 |
| Decision Date: | 08/29/2014 | UR Denial Date: | 11/25/2013 |
| Priority: | Standard | Application Received: | 11/26/2013 |

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Board Certified in Anesthesiology, has a subspecialty in Pain Medicine 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 expert 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 injured worker is a 28 year old female who was reportedly injured on 05/28/2010. The mechanism of injury is undisclosed. Complaints of neck pain with radiating pain into the upper extremities and migraine like headaches were noted. The procedure note dated 02/05/13 indicates the injured worker having undergone trigger point injections at the trapezius and rhomboid at the right. The clinical note dated 03/07/13 indicates the injured worker continuing with complaints of migraine like headaches. The clinical note dated 06/07/13 indicates the injured worker complaining of carpal tunnel with cubital tunnel syndrome on the right. The injured worker reported persistent numbness at the right ulnar nerve distribution as well as decreased grip strength as well. The clinical note dated 08/07/13 indicates the injured worker utilizing a transcutaneous electrical nerve stimulation (TENS) unit which has reduced the severity of pain. The injured worker did report lifting restrictions of three to five pounds with her right upper extremity. The clinical note dated 10/15/13 indicates the injured worker having complaints of increasing anxiety. There is also an indication the injured worker is showing limitations with activities of daily living secondary to the chronic pain. The note indicates the injured worker utilizing an extensive list of pharmacological interventions.

IMR ISSUES, DECISIONS AND RATIONALES

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

Voice Activated Speech Recognition Software: Upheld

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: 1.)Anna K Fletcher; Greg Shaw (2011). How voice-recognition software presents a useful transcription tool for qualitative and mixed methods researchers. *International Journal of Multiple Research Approaches*: Vol. 5, No. 2, pp. 200-206. doi: 10.5172/mra.2011.5.2.200. 2.)Nick Miller. Measuring up to speech intelligibility. *International Journal of Language & Communication Disorders*. Volume 48, Issue 6, pages 601-612, November-December 2013.

Decision rationale: The documentation indicates the injured worker having a long history of ongoing migraine like headaches as well as findings consistent with right-sided cubital tunnel syndrome. The use of voice activated speech recognition software is indicated for injured workers for medical purposes provided specific criteria are met to include significant functional deficits have been identified by clinical exam likely to benefit would be use of a speech recognition software. No information was submitted regarding the injured worker's ongoing functional deficits that would likely benefit with the use of speech recognition software. Therefore, this request is not fully indicated as medically necessary.