

Case Number:	CM13-0058983		
Date Assigned:	12/30/2013	Date of Injury:	08/15/2013
Decision Date:	07/30/2014	UR Denial Date:	11/13/2013
Priority:	Standard	Application Received:	11/27/2013

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 Geriatrics, 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 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 62 year old woman with a date of injury of 8/15/13. She was seen by her primary treating physician on 9/30/13. She had low back pain and bilateral lower extremity pain with weakness, give out and fall. She also had bilateral foot and ankle pain with injections in the past which were not helpful. Her meds were said to be helpful. Her physical exam and functional status were unchanged. Her diagnoses were low back and bilateral lower extremity pain and bilateral plantar fasciitis. At issue in this review is the request for bilateral lower extremity EMG/NCV.

IMR ISSUES, DECISIONS AND RATIONALES

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

ELECTROMYOGRAPGY (EMG) OF THE BILATERAL LOWER EXTREMITIES:

Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 297.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 287-326.

Decision rationale: Electromyography (EMG), and nerve conduction velocities (NCV) may help identify subtle focal neurologic dysfunction in patients with low back symptoms, or both,

lasting more than three or four weeks. This injured worker has pain and weakness documented but the records do not document a detailed physical exam to support that the pain or symptoms are neuropathic/radicular in nature. There are no red flags to warrant further imaging, testing or referrals. The records do not support the medical necessity for an EMG of the bilateral lower extremities. The request is not medically necessary and appropriate.

NERVE CONDUCTION STUDIES (NCS) OF THE BILATERAL LOWER EXTREMITIES: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 297.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 287-326.

Decision rationale: Electromyography (EMG), and nerve conduction velocities (NCV) may help identify subtle focal neurologic dysfunction in patients with low back symptoms, or both, lasting more than three or four weeks. This injured worker has pain and weakness documented but the records do not document a detailed physical exam to support that the pain or symptoms are neuropathic/radicular in nature. There are no red flags to warrant further imaging, testing or referrals. The records do not support the medical necessity for a NCV of the bilateral lower extremities. The request is not medically necessary and appropriate.