

Case Number:	CM13-0061170		
Date Assigned:	12/30/2013	Date of Injury:	03/23/2013
Decision Date:	08/27/2014	UR Denial Date:	11/25/2013
Priority:	Standard	Application Received:	12/04/2013

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 Licensed in Chiropractic, has a subspecialty in Acupuncture 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 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 36 year old female who reported wrist, hand, arm, right shoulder, low back, neck and head pain from injury sustained on 03/23/13 due to cumulative trauma and a part of the wall above her head broke and fell, hitting her neck and right arm. MRI of the cervical spine revealed displacement of cervical intervertebral disc without myelopathy. Patient is diagnosed with headache; cervical, thoracic, lumbar sprain; pain in joint involving hand; tenosynovitis of hand/ wrist; sprain of unspecified of shoulder and upper arm. Patient has been treated with medication, therapy. Per medical notes dated 10/30/13, patient complains of head pain rated at 7/10, right shoulder pain rated at 7/10 and bilateral wrist pain rated at 7/10. Patient states that symptoms persist but the medications do offer her temporary relief of pain and her ability to have restful sleep. Examination revealed tenderness to palpation and decreased range of motion of right shoulder and wrists. Per acupuncture progress notes dated 12/23/14, patient complains of constant pain in the neck, shoulder and upper extremity which are rated at 8/10. Pain is described as throbbing, pulsing, aching and stabbing. Examination revealed paraspinal tenderness in the cervical and thoracic spine and moderate tenderness in right shoulder. Patient indicates decreased pain and intensity of pain was less than before. Per medical notes dated 01/13/14, patient states she has been receiving acupuncture and the improvement is limited. Per medical notes dated 02/17/14, patient complains of constant pain in her head rated at 8/10; right shoulder rated at 7/10; wrist rated at 7/10; hand rated at 6/10; neck and upper back pain rated at 7/10.

IMR ISSUES, DECISIONS AND RATIONALES

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

6 ELECTRO ACUPUNCTURE TO CERVICAL SPINE WITH WAVE FORMS TO THE NEEDLES WITH OR WITHOUT MANUAL STIMULATION: Upheld

Claims Administrator guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 174. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

Decision rationale: Per Occupational medicine practice guidelines in chapter 8 page 174: "invasive techniques (e.g., acupuncture) have no proven benefit in treating acute neck and upper back symptoms". Per ODG guidelines for neck and upper back- Acupuncture: "Under study for upper back, but not recommended for neck pain. Despite substantial increases in its popularity and use, the efficacy of acupuncture for chronic mechanical neck pain still remains unproven. Acupuncture reduces neck pain and produces a statistically, but not clinically, significant effect compared with placebo". Per guidelines and review of records, acupuncture for cervical spine is not medically necessary.