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| Case Number: | CM13-0061724 | | |
| Date Assigned: | 01/15/2014 | Date of Injury: | 10/14/2012 |
| Decision Date: | 04/15/2014 | UR Denial Date: | 11/20/2013 |
| Priority: | Standard | Application Received: | 12/05/2013 |

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 General Surgery, 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 59-year-old male, who was injured on October 14, 2012, in an assault. The injured worker was diagnosed with a symptomatic scalp mass. An evaluation on November 6, 2013, documented the injured worker had been struck with a flashlight during an altercation and developed an area of swelling on the vertex of the scalp. There was continued persistent pain. Medications included allopurinol, Lisinopril, metformin, glimepiride, Lyrica, and hydrochlorothiazide. The injured worker was in no significant distress. Vital signs were unremarkable. A 2 x 2 cm area of swelling was noted on the vertex of the scalp, which was minimally tender to palpation and was non-mobile. The impression was a symptomatic scalp mass status post assault, diabetes, a history of hepatitis C, and a history of nephrolithiasis. Surgery was recommended.

IMR ISSUES, DECISIONS AND RATIONALES

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

SURGICAL EXCISION OF SCALP MASS: Overturned

Claims Administrator guideline: Decision based on MTUS ACOEM.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Evidence: Benign and Malignant Soft Tissue Tumors Treatment & Management Author: Vinod B Shidham, MD, FRCPath; Chief Editor: Harris Gellman, MD.

Decision rationale: The California Medical Treatment Utilization Schedule and Official Disability Guidelines - Treatment in Workers' Compensation do not address specifically the excision of a scalp mass. The current literature indicates complete local excision is adequate treatment for a benign soft tissue tumor. The records reflect the scalp mass is tender and symptomatic. The mass was not present prior to the assault of October 14, 2012. The request for surgical excision of a scalp mass is certified.