

Case Number:	CM13-0067019		
Date Assigned:	01/03/2014	Date of Injury:	08/06/2003
Decision Date:	06/05/2014	UR Denial Date:	11/26/2013
Priority:	Standard	Application Received:	12/17/2013

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 Occupational Medicine 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 patient is a 48 year old female who was injured on 08/06/2003. She was lifting and carrying the portable photo copy machine onto a desk, at which time she felt a sharp pain in her low back. Prior treatment history has included Gabapentin, Senokot-S, Norco, and Tizanidine HCL. The patient underwent a lumbar laminectomy. Pain Medicine re-evaluation note dated 01/02/2014 reports the patient complains of neck pain that radiates to the right in the upper extremities, low back pain that radiates bilaterally in the lower extremities and lower extremity pain in the left side foot and in the right hip and knee. The patient's pain is rated as 5/10 in intensity with medications and 7/10 without medications. Her pain increases with activity and walking. She reports her pain has worsened since her last visit. On exam, the patient is observed to be in moderate distress. The patient's gait is slow and she utilizes a cane in order to ambulate. There is spasm noted in the bilateral paraspinal musculature. There is tenderness noted upon palpation bilaterally in the paravertebral area L4-S1 levels. The pain is significantly increased with flexion and extension. Motor exam shows decreased strength in the bilateral lower extremities. Pain Medicine re-evaluation note dated 12/05/2013 states the patient complains of low back pain that radiates to bilateral lower extremities. The patient's pain level is increased with average pain level of 5/10 with medications and 8/10 without medications. Objective findings on exam revealed the patient's gait is antalgic and slow and assisted with the use of a cane. The range of motion of the lumbar spine revealed moderate reduction secondary to pain. The sensory examination showed decreased touch in the right lower extremity. Decreased sensation was noted along the L4-5 dermatome; motor examination revealed no change. Diagnoses are lumbar radiculopathy, lumbar facet arthropathy, status post lumbar laminectomy, chronic pain, and history of vitamin D deficiency, L3-L5 4 mm; and possible lumbar surgery. Treatment and plan includes a CMP lab.

IMR ISSUES, DECISIONS AND RATIONALES

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

A COMPREHENSIVE METABOLIC PANEL (CMP) STUDY: Overturned

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints, Chronic Pain Treatment Guidelines NSAIDs Page(s): 70.

Decision rationale: As per CA MTUS guidelines, periodic lab monitoring is warranted in the setting of chronic NSAID or acetaminophen use. The patient has documented narcotic dependence and continues to take Norco. A complete metabolic panel does not appear to have been done recently after review of the medical records. Medical necessity is established, and the request is approved.