

Case Number:	CM13-0067295		
Date Assigned:	01/03/2014	Date of Injury:	06/10/2008
Decision Date:	05/27/2014	UR Denial Date:	10/18/2013
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 Internal Medicine 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 patient is a 57 year old female school bus driver with a date of injury on 06/10/2008. A student ran into her arm and pulled it backwards resulting in a right shoulder hyperextension injury. She had right shoulder surgery on 09/25/2008. She had a MRI of her right shoulder (11/16/2007 before the injury revealed tendonitis, degenerative changes and bursitis, 08/21/2008 degenerative changes and tendonitis, 11/11/2010 acromioclavicular arthritis and cervical spine. On 02/22/2013, she had a scalene block. EMG/NCS were normal prior to the block. On 08/14/2013, the impression was that she had thoracic outlet syndrome. She had physical therapy and scalene block. The condition improved prior to the block. Pulses have been normal. Strength and sensory exam have been normal. Reflexes were normal. The right shoulder range of motion is limited. At the time of the requests, another scalene block was certified since she has had episodes of symptoms that resolved.

IMR ISSUES, DECISIONS AND RATIONALES

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

SSEP TESTING WITH ARMS IN NEUTRAL AND STRESS POSITIONS: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Guidelines, 3rd Edition, pages 281-282.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints
Page(s): 201.

Decision rationale: There were no red flag signs documented. She had degenerative changes of the right shoulder before the injury and after surgery. She had periods of limited symptoms with normal strength, sensory exam and reflexes. There were no signs of vascular injury or compromise. MTUS chapter 9 for shoulder complaints note that tests for thoracic outlet syndrome are of questionable value. Referral to a specialist is recommended if invasive treatment is entertained. The patient had responded to conservative treatment previously. There is no documentation that she has failed all conservative treatment and is a surgical candidate at this point in time. At the time of this request, another scalene injection was certified to continue conservative treatment.

AN MRI OF THE BRACHIAL PLEXUS: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Guidelines, 3rd Edition, pages 281-282.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints
Page(s): 201.

Decision rationale: There were no red flag signs documented. She had degenerative changes of the right shoulder before the injury and after surgery. She had periods of limited symptoms with normal strength, sensory exam and reflexes. There were no signs of vascular injury or compromise. MTUS chapter 9 for shoulder complaints note that tests for thoracic outlet syndrome are of questionable value. Referral to a specialist is recommended if invasive treatment is entertained. She had responded to conservative treatment previously. There is no documentation that she has failed all conservative treatment and is a surgical candidate at this point in time. At the time of this request, another scalene injection was certified to continue conservative treatment. There is no sign of a radiculopathy or plexopathy.

AN MRA OF THE SUBCLAVIAN ARTERY: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Guidelines, 3rd Edition, pages 281-282.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints
Page(s): 201.

Decision rationale: There were no red flag signs documented. She had degenerative changes of the right shoulder before the injury and after surgery. She had periods of limited symptoms with normal strength, sensory exam and reflexes. There were no signs of vascular injury or compromise. MTUS Final Determination Letter for IMR Case Number CM13-0067295 4 chapter 9 for shoulder complaints note that tests for thoracic outlet syndrome are of questionable

value. Referral to a specialist is recommended if invasive treatment is entertained. She had responded to conservative treatment previously. There is no documentation that she has failed all conservative treatment and is a surgical candidate at this point in time. At the time of this request, another scalene injection was certified to continue conservative treatment. There is no documentation of a vascular injury.

AN MRV OF THE SUBCLAVIAN VEIN: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Guidelines, 3rd Edition, pages 281-282.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints Page(s): 201.

Decision rationale: There were no red flag signs documented. She had degenerative changes fo the right shoulder before the injury and after surgery. She had periods of limited symptoms with normal strength, sensory exam and reflexes. There were no signs of vascular injury or compromise. MTUS chapter 9 for shoulder complaints note that tests for thoracic outlet syndrome are of questionable value. Referral to a specialist is recommended if invasive treatment is entertained. She had responded to conservative treatment previously. There is no documentation that she has failed all conservative treatment and is a surgical candidate at this point in time. At the time of this request, another scalene injection was certified to continue conservative treatment. There is no documentation of any vascular injury.