

<b>Case Number:</b>	CM13-0068697		
<b>Date Assigned:</b>	01/03/2014	<b>Date of Injury:</b>	12/10/2009
<b>Decision Date:</b>	07/18/2014	<b>UR Denial Date:</b>	12/11/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	12/19/2013

### 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 Family Practice 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 63 year old female who sustained a work related injury on 7/15/14 involving the right wrist and fingers. She had a diagnosis of deQuervain's and underwent a dorsal compartment release. She has a past history of stroke, heart disease diabetes and hypertension. A progress note on 11/18/13 noted that her blood pressure and diabetes were under control, however due to her medical history an internal medicine consult was requested.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**INTERNAL MEDICINE CONSULT:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM PRACTICE GUIDELINES, CHAPTER 7: INDEPENDENT MEDICAL EXAMINATIONS AND CONSULTATIONS.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 1 Prevention Page(s): 12.

**Decision rationale:** According to the ACOEM guidelines, a specialist referral may be made if the diagnosis is uncertain, extremely complex, when psychosocial factors are present, or when the plan or course of care may benefit from additional expertise. A consultation is used to aid in diagnosis, prognosis, therapeutic management, determination of medical stability, and permanent residual loss and/or examinees' fitness for return to work. In this case, the diagnosis was known

and there were no exacerbations of the chronic medical illnesses. In addition, there is no documentation that states the reason for the referral or the chronic diagnoses are related to the industrial injury. As a result the internal medicine consult is not medically necessary.