MAXIMUS Federal Services

Case Number:	CM13-0072555		
Date Assigned:	01/08/2014	Date of Injury:	11/07/2011
Decision Date:	05/23/2014	UR Denial Date:	12/04/2013
Priority:	Standard	Application Received:	12/31/2013

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 Otolaryngology (ENT) 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:

Patient is a 61 year old male firefighter with a many year history of chronic sinusitis. He underwent surgery for this in 2000. Over the past several years his symptoms including nasal congestion, ear pain and plugging, PND, facial pressure have recurred. Records show ENT evaluation for this problem was done on 6/27/13. CT scan of the sinuses was done 7/1/13 in further evaluation. Patient was again seen by the same ENT on 10/21/13. Nasal endoscopy was performed bilaterally and a culture was taken from the left side of the nose. Recommendation for further care and evaluation at the end of the note from this visit are identical to those made at the end of note for the office visit dated 7/1/13 including the request for authorization for a CT of the sinuses.

IMR ISSUES, DECISIONS AND RATIONALES

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

CT SCAN OF SINUSES: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Head Chapter.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Aygun N and Ziinreich SJ. Radiology of the nasal cavity and paranasal sinuses, Chapter 49 in Cummings Otolaryngology Head and Neck Surgery ed. 4, 2005, Mosby, page(s) 1153-1179.

Decision rationale: MTUS does not address this issue. ODG Head section addresses use of CT head for trauma and neurologic issue, but does not address use of this imaging modality in the setting of sinusitis. The [redacted] and [redacted]. Radiology of the nasal cavity and paranasal sinuses imaging with CT is medically indicated and the accepted standard for evaluation of chronic sinusitis, this patient had a CT done 3 months prior to the request that was made for the same study in October. It is not medically necessary that a patient with unchanged symptoms undergo the same study twice in the span of 3-4 months.