

<b>Case Number:</b>	CM14-0002930		
<b>Date Assigned:</b>	01/24/2014	<b>Date of Injury:</b>	01/28/2010
<b>Decision Date:</b>	08/06/2014	<b>UR Denial Date:</b>	12/04/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/08/2014

### 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:

This is a 44 year-old female with a 1/28/10 date of injury to the low back after lifting heavy boxes. The patient failed multiple therapies for her pain. She was noted to have undergone multiple psychiatric evaluations and was treated with psychotherapy and psychotropic medication. The patient declined low back surgery in 2011. The patient was seen on 11/8/13 with complaints of headaches. She also noted anxiety and depression, as well as chronic heartburn and stomach pain. She has persistent gastritis secondary to her chronic medication use. She noted mood swings and stress and episodes of diarrhea. She also expresses she wants to be in solitude. The patient is on Prozac and a benzodiazepine. Exam findings revealed limited lumbar range of motion, positive Kemp's, Yeoman's, Minor's, Patrick test and iliac compression testing. Treatment to date: chiropractic therapy, Physical Therapy, acupuncture, epidurals, facet injections, medications. An adverse determination was received on 12/4/13 for a given the patient has displayed no interval changes since her last psychiatric treatments.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**PSYCHOLOGICAL EVALUATION/CONSULTATION:** Overturned

**Claims Administrator guideline:** Decision based on MTUS ACOEM.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 100-101.

**Decision rationale:** The California MTUS states that psychological evaluations are recommended and are generally accepted, well-established diagnostic procedures not only with selected use in pain problems, but also with more widespread use in chronic pain populations. This patient has a history of psychiatric treatment. She is on Prozac and Valium and is having mood swings with depression, anxiety, and wants to be alone. Despite the patient's use of psychotropic medication, a psychological evaluation is reasonable given this patient's psychiatric symptoms are not controlled despite her medication use. Therefore, the request for a psychological evaluation was medically necessary.

**INTERNAL MEDICINE CONSULT:** Overturned

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

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) Chapter 6- Independent Medical Examinations and Consultations.

**Decision rationale:** The California MTUS states that consultations are recommended, and a health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial factors are present or when the plan or course of care may benefit from additional expertise. The patient notes abdominal pain with diarrhea. While this may be anxiety related, an internal medicine consult for a work up of this patient's abdominal pain and diarrhea is reasonable. Therefore, the request for an internal medicine consult was medically necessary.