

<b>Case Number:</b>	CM14-0004126		
<b>Date Assigned:</b>	07/02/2014	<b>Date of Injury:</b>	09/15/1999
<b>Decision Date:</b>	07/31/2014	<b>UR Denial Date:</b>	12/04/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/09/2014

### 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 Physical Medicine and Rehabilitation 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 injured worker is a 72-year-old female who reported an injury on 09/15/1999. The mechanism of injury was not provided within the documentation. The injured worker's prior treatments were noted to be physical therapy and medication. The injured worker's diagnosis was noted to be cervical disc displacement. A Primary Treating Physician's Progress Report dated 09/09/2013 indicate the injured worker with complaints of continued neck and low back pain, with left upper extremity radicular pain. The objective findings included of the cervical spine: positive C6 dermatome, positive left upper extremity radiculopathy, positive spasms, and positive Spurling's. The treatment plan is for a nerve conduction study of the bilateral upper extremities to rule out radiculopathy. The provider's rationale for the request was provided within the documentation dated 09/09/2013. A Request for Authorization for medical treatment was included within this review, also dated 09/09/2013.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**EMG for Right Upper Extremity:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 177-179.

**Decision rationale:** The California MTUS/American College of Occupational and Environmental Medicine states that unequivocal objective findings that identify specific nerve compromise on the neurologic examination are sufficient evidence to warrant imaging studies if symptoms persist. When the neurological examination is less clear, however, further physiologic evidence of nerve dysfunction can be obtained before ordering an imaging study. The documentation provided in the Primary Treating Physician's Progress Report fails to provide adequate nerve dysfunction. The progress report fails to indicate decreased reflexes or decreased strength, and decreased sensation. According to the guidelines, imaging studies are not warranted with the lack of criteria met in this physician's progress report. Therefore, the request for EMG for right upper extremity is not medically necessary.

**NCS for Right Upper Extremity:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 177-179.

**Decision rationale:** The California MTUS/American College of Occupational and Environmental Medicine states that unequivocal objective findings that identify specific nerve compromise on the neurologic examination are sufficient evidence to warrant imaging studies if symptoms persist. When the neurological examination is less clear, however, further physiologic evidence of nerve dysfunction can be obtained before ordering an imaging study. The documentation provided in the Primary Treating Physician's Progress Report fails to provide adequate nerve dysfunction. The progress report fails to indicate decreased reflexes or decreased strength, and decreased sensation. According to the guidelines, imaging studies are not warranted with the lack of criteria met in this physician's progress report. Therefore, the request for NCS for right upper extremity is not medically necessary.

**EMG for Left Upper Extremity:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints, Chapter 9 Shoulder Complaints, Chapter 10 Elbow Disorders (Revised 2007) Page(s): 207; 607-609.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 177-179.

**Decision rationale:** The California MTUS/American College of Occupational and Environmental Medicine states that unequivocal objective findings that identify specific nerve compromise on the neurologic examination are sufficient evidence to warrant imaging studies if symptoms persist. When the neurological examination is less clear, however, further physiologic evidence of nerve dysfunction can be obtained before ordering an imaging study. The documentation provided in the Primary Treating Physician's Progress Report fails to provide

adequate nerve dysfunction. The progress report fails to indicate decreased reflexes or decreased strength, and decreased sensation. According to the guidelines, imaging studies are not warranted with the lack of criteria met in this physician's progress report. Therefore, the request for EMG for left upper extremity is not medically necessary.

**NCS for Left Upper Extremity: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 177-179.

**Decision rationale:** The California MTUS/American College of Occupational and Environmental Medicine states that unequivocal objective findings that identify specific nerve compromise on the neurologic examination are sufficient evidence to warrant imaging studies if symptoms persist. When the neurological examination is less clear, however, further physiologic evidence of nerve dysfunction can be obtained before ordering an imaging study. The documentation provided in the Primary Treating Physician's Progress Report fails to provide adequate nerve dysfunction. The progress report fails to indicate decreased reflexes or decreased strength, and decreased sensation. According to the guidelines, imaging studies are not warranted with the lack of criteria met in this physician's progress report. Therefore, the request for NCS for left upper extremity is not medically necessary.