

Case Number:	CM14-0007181		
Date Assigned:	02/07/2014	Date of Injury:	10/12/2013
Decision Date:	12/12/2014	UR Denial Date:	12/26/2013
Priority:	Standard	Application Received:	01/20/2014

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 patient is a 20 years old female who sustained blunt head/face trauma on 10/12/13. There is reported to be an associated LOC. She continues to complain of daily headaches and dizziness 2 months post the trauma. No focal neurological changes are demonstrated, but due to the ongoing symptoms a brain MRI is requested.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 MAGNETIC RESONANCE IMAGING OF THE BRAIN, WITHOUT CONTRAST, AS AN OUTPATIENT: 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 <http://www.aafp.org/afp/2012/1201/p1045.html>

Decision rationale: MTUS Guideines do not address the medical appropriateness of brain scanning for post traumatic brain injury. Other standard texts and resources (american academy of family practice standards) do address this issue. With persistent symptoms that have not resolved over a few days to weeks the use of MRI scanning is consistent with current standards of practice. The brain MRI is medically necessary.

