

<b>Case Number:</b>	CM14-0104513		
<b>Date Assigned:</b>	07/30/2014	<b>Date of Injury:</b>	06/11/2013
<b>Decision Date:</b>	09/23/2014	<b>UR Denial Date:</b>	06/17/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/07/2014

### 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:

The request for independent medical review for the Sentra AM #60 was signed on June 30, 2014. There was an electromyogram report from December 18, 2013. There was no evidence of cervical radiculopathy and only mild carpal tunnel syndrome evidence on the left. There was a request for authorization for the Sentra medicines from June 2, 2014. There was also a form signed by the provider from June 13, 2014. There was documentation of a herniated nucleus nuclear disc.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Sentra am #60:** Upheld

**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 (ODG) under Pain, Medical Foods.

**Decision rationale:** Sentra AM: contains Choline and other agents in a proprietary formula. Choline is a precursor of acetylcholine. There is no known medical need for choline supplementation except for the case of long-term parenteral nutrition or for individuals with choline deficiency secondary to liver deficiency. There is inconclusive evidence that this product is indicated for an endurance aid, memory, seizures, and transient ischemic attacks. There is no evidence this claimant had a deficiency in these and other components of Sentra AM. The request is not considered medically necessary.

