

Case Number:	CM14-0107794		
Date Assigned:	08/01/2014	Date of Injury:	11/01/2012
Decision Date:	09/03/2014	UR Denial Date:	07/02/2014
Priority:	Standard	Application Received:	07/11/2014

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 Neurological Surgery 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 records presented for review indicate that this 45-year-old gentleman was reportedly injured on November 1, 2012. The mechanism of injury is not listed in these records reviewed. The most recent progress note, dated June 24, 2014, indicates that there are ongoing complaints of low back pain and left ankle pain. The physical examination demonstrated no evidence of left ankle medial or lateral laxity. Examination of the lumbar spine indicated a normal lower extremity neurological examination and ability to heel and toe walk. Diagnostic imaging studies of the lumbar spine indicated disk degeneration at L3/L4 and L4/L5. There was a disc protrusion at L4/L5 with near contact of the left L5 nerve root. A CT of the left ankle indicated postsurgical changes of the left fibula as well as disuse osteopenia. Previous treatment includes lumbar spine epidural steroid injections a request had been made for a second opinion with orthopedic surgeons regarding the left ankle and lumbar spine and was not certified in the pre-authorization process on July 2, 2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Second opinion with Orthopedic Physician for left ankle.: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Page(s): 92, Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG): Ankle & Foot (Acute & Chronic).

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 7 - Independent Medical Examinations and Consultations, page 127.

Decision rationale: The injured employee has already seen an orthopedic surgeon regarding his low back pain and left ankle pain. The results of the physical examination and diagnostic studies are unremarkable and it is unclear why a second opinion is requested. Without additional justification, this request for a second opinion with an orthopedic surgeon for the left ankle is not medically necessary.

Second opinion with Spine Surgeon for Lumbar Spine.: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Page(s): 92, Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG): Low Back - Lumbar & Thoracic (Acute & Chronic).

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 7 - Independent Medical Examinations and Consultations, page 127.

Decision rationale: The injured employee has already seen an orthopedic surgeon regarding his low back pain and left ankle pain. The results of the physical examination and diagnostic studies are unremarkable, and it is unclear why a second opinion is requested. Without additional justification this request for a second opinion with an orthopedic surgeon for the lumbar spine is not medically necessary.