

Case Number:	CM14-0108182		
Date Assigned:	09/16/2014	Date of Injury:	08/19/2008
Decision Date:	10/17/2014	UR Denial Date:	07/03/2014
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 Neurology 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 68 year old female who was assaulted by a thief and suffered a head injury on 8/19/2008 while working as an assistant manager. The injured worker presented in May 2014 for seizures. Per the medical record, the injured worker has recurrent seizures despite taking a full dose of the anti-convulsant Keppra. Per a physician's note, the patient had seen a neurologist at [REDACTED], who recommended a five-day stay in the [REDACTED] to clearly delineate her seizure disorder. The results of the epilepsy monitoring unit were not available in the medical at the time of this review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Oxcarbazepine (Trileptal) 300mg #30: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines: Treatment for Workers' compensation, Online Edition; Head Chapter, Anticonvulsants

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG): Head Section, anti-convulsants.

Decision rationale: In this case, the injured worker continues to suffer from seizures. A note from a psychologist suggested that these events were non-epileptic (pseudo seizures). However, the determination of pseudo seizures can only be definitively made after an inpatient stay in an [REDACTED]. Per the notes, a neurologist at the [REDACTED] recommended a five-day [REDACTED] stay, however those results are not available in the record, and presumably has not been done yet. If a patient suffers from persistent seizures despite taking an anti-epileptic drug (AED), then it is reasonable to add another AED. Since this injured worker is already taking a full dose of Keppra, then is reasonable to add another AED. Therefore, it is reasonable to start the patient on Trileptal. In this case, Trileptal is not for AED prophylaxis, but rather treatment of active seizures, refractory to Keppra. It is therefore reasonable to start the patient on Trileptal. The request is medically necessary.