

<b>Case Number:</b>	CM14-0109672		
<b>Date Assigned:</b>	08/01/2014	<b>Date of Injury:</b>	09/23/2013
<b>Decision Date:</b>	09/03/2014	<b>UR Denial Date:</b>	06/17/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/15/2014

### 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 Family 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 injured worker is a 53 yr. old male claimant who sustained a work injury on 9/23/13 involving the low back, neck, right knee and right upper extremities. He was diagnosed with strains of the cervical, lumbar and right knee region. He had no history of illicit drug use and rarely drank wine. He had used Tylenol for pain. He had no chronic medical problems aside from the injury. A request was made in June 2014 for toxicology screens x 4 without clinical indication or note of controlled substance use.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Toxicology x 4 units:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Criteria for use of opioids, Opioids, steps to avoid misuse/addiction Page(s): 77-80, 94.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 83-91.

**Decision rationale:** According to the California MTUS Chronic Pain Treatment Guidelines, urine toxicology screen is used to assess presence of illicit drugs or to monitor adherence to prescription medication program. There's no documentation from the provider to suggest that there was illicit drug use or noncompliance. There were no prior urine drug screen results that

indicated noncompliance, substance-abuse or other inappropriate activity. Based on the above references and clinical history an advanced requisition the request for 4 Urine Toxicology screens is not medically necessary.