

<b>Case Number:</b>	CM14-0010313		
<b>Date Assigned:</b>	02/21/2014	<b>Date of Injury:</b>	03/11/2009
<b>Decision Date:</b>	06/13/2014	<b>UR Denial Date:</b>	01/21/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/27/2014

### 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 Physical Medicine & Rehabilitation, has a subspecialty in Pain Management and is licensed to practice in Texas. 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 year old female who reported an injury on 03/11/2009 due to an unknown mechanism. The clinical note dated 01/09 2014 indicated diagnoses of cervical stenosis, status post motor vehicle accident, neck pain, and back pain. The injured worker reported neck pain, back pain and headache with difficulty walking. On physical exam, there was tenderness to palpation at the cervical and lumbar spines. The injured worker's deep tendon reflexes were +4. The request for authorization was not submitted.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**DME CERVICAL COLLAR QUANTITY :1.00:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Page(s): 175.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Neck & Upper Back, Post-Operative (Fusion).

**Decision rationale:** The Official Disability Guidelines (ODG) indicates the cervical collar is not recommended after single-level anterior cervical fusion with plate. The use of a cervical brace does not improve the fusion rate or the clinical outcomes of patients undergoing single-level anterior cervical fusion with plating. Plates limit motion between the graft and the vertebra in

anterior cervical fusion. Still, the use of cervical collars after instrumented anterior cervical fusion is widely practiced. The injured worker was approved for a multilevel cervical fusion. There is no lasting benefit of the cervical collar and it can cause weakness. Therefore, per the Official Disability Guidelines (ODG), the request for a cervical collar is not medically necessary.

**NEUROSURGICAL CONSULTATION QUANTITY: 1.00:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM GUIDELINES, CHAPTER 7, 127

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Guidelines Updated, Chapter 6, page 163.

**Decision rationale:** The American College of Occupational and Environmental Medicine states that a consultation is intended to aid in assessing the diagnosis, prognosis, therapeutic management, determination of medical stability, and permanent residual loss and/or examinee's fitness for return to work. It is unclear how a neurosurgical exam would aid in the providers determination of prognosis, therapeutic management, and determination of medical stability for the injured worker. There was no clear rationale to support the consultation. Therefore, per the American College of Occupational and Environmental Medicine (ACOEM) guidelines, the request for neurosurgical consultation is not medically necessary.