

Case Number:	CM14-0012121		
Date Assigned:	03/07/2014	Date of Injury:	05/13/2003
Decision Date:	06/30/2014	UR Denial Date:	11/25/2013
Priority:	Standard	Application Received:	01/30/2014

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:

Patient is a 65 year-old male with no recorded date of injury. He has been diagnosed with metastatic renal cell carcinoma. The medical record associated with the request for authorization, a primary treating physician's progress report, dated 11/13/2013, lists subjective complaints as minimal pain and discomfort. He had no acute complaints. Objective findings: Physical examination revealed no chest pain or palpitations and no shortness of breath or dyspnea on exertion. His Karnofsky performance status - a scale used to rate a patient's ability to survive chemotherapy for cancer -- was 100%. Extraocular movements were intact and oropharynx was clear. Diagnosis: 1. Metastatic renal cell carcinoma. Patient underwent a CT scan of the chest, abdomen, and pelvis on 10/02/2013 which revealed posterior right liver focal lucencies, increasing in size, and left midpole and lower pole relatively dense masses, increasing in size. There was also lymphadenopathy at the third portion of the duodenum, increasing in size.

IMR ISSUES, DECISIONS AND RATIONALES

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

COMPUTED TOMOGRAPHY (CAT/CT) SCAN OF THE NECK: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 179-180.

MAXIMUS guideline: Decision based on MTUS ACOEM Page(s): 177-178.

Decision rationale: At the time of the request, the patient's Karnofsky score was 100, which is indicative of "normal health". In this case, considering the patient has metastatic disease in the liver and possibly the duodenum, it must be assumed that the physician scored the patient at 100 because the patient had no physical complaints and had the appearance of being healthy. The subjective section of the progress note tends to substantiate this assumption. There are no complaints of neck pain, neck swelling, arm pain, or weakness. A neck examination and neurologic exam are absent. Therefore, the request for Computed Tomography (CAT/CT) Scan of the neck is not medically necessary and appropriate.