

Case Number:	CM14-0017053		
Date Assigned:	04/16/2014	Date of Injury:	05/23/2013
Decision Date:	05/29/2014	UR Denial Date:	01/27/2014
Priority:	Standard	Application Received:	02/11/2014

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 Orthopedic 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 claimant is a 36-year-old female who was injured on May 23, 2013 lifting a metal instrument resulting in acute neck complaint. Records indicate conservative care including a Transcutaneous Electrical Nerve Stimulation (TENS) unit, medication management, a prior epidural steroid injection and physical therapy. Recent clinical assessment of April 9, 2014 indicated continued complaints of pain about the neck with radiating pain to the upper extremities despite continued use of narcotic medication. There was also persistent leg discomfort. Physical exam showed the claimant was noted to be status post a prior anterior cervical discectomy and fusion at C3 through 5. Previous MRI scan had showed evidence of stenosis at C3-4, C4-5 as well as mild central stenosis at C5-6 and C6-7. Initial surgical request Final Determination Letter for IMR Case Number CM14-0017053 3 in this case was for the C3 through 7 levels for which the C3 through 5 surgeries ultimately took place in February of 2014. There is a request for the fixation to be performed anteriorly at C5-6 and C6-7 with postoperative use of a collar.

IMR ISSUES, DECISIONS AND RATIONALES

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

FIXATION ANTERIOR C5-6, C6-7 FORAMINOTOMIES POSTERIOR DECOMPRESSION PHILADELPHIA COLLAR: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 181-183.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 165.

Decision rationale: California ACOEM Guidelines would not support the proposed procedure. While this individual is noted to be with mild stenosis on imaging, there is no current documentation of radicular finding on examination that would clinically correlate with the claimant's C5-6 or C6-7 level to satisfy Guideline criteria. Absence of the above would fail to support surgical intervention as well as postoperative need of a collar.