

<b>Case Number:</b>	CM14-0017093		
<b>Date Assigned:</b>	05/05/2014	<b>Date of Injury:</b>	07/15/2008
<b>Decision Date:</b>	07/09/2014	<b>UR Denial Date:</b>	02/11/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	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 Ophthalmology 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 patient is a 29 year-old female with a date of injury on 7/15/2009 with blunt head trauma, for whom request is made for Ophthalmology consultation. The patient currently is diagnosed with cervical disc syndrome, left shoulder impingement syndrome, left shoulder rotator cuff rupture, right shoulder rotator cuff syndrome, carpal tunnel syndrome, and low back syndrome. On examination dated 11/11/2013, the patient complaints of left eye watering and blurred vision along with left ear tinnitus and intermittent loss of hearing. Examination is significant for "left eye appears smaller with irritation and watering." The patient has a history of eye surgery as an infant.

### IMR ISSUES, DECISIONS AND RATIONALES

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

#### **REFERRAL TO OPHTHAMOLOGIST FOR CONSULT:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine, 2nd Edition, Chapter 7- Independent Medical Examinations and Consultations.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 16 Eye Chapter Page(s): 415. Decision based on Non-MTUS Citation AMERICAN COLLEGE OF OCCUPATIONAL

AND ENVIRONMENTAL MEDICINE (ACOEM), 2ND EDITION, (2004) , INDEPENDENT MEDICAL EXAMINATIONS AND CONSULTATIONS.

**Decision rationale:** On evaluation dated 11/11/2013 with the patient's family practitioner, the patient complains of left eye blurred vision and watering. The patient experienced blunt head trauma to the left side, and the symptom of blurred vision warrants evaluation with an Ophthalmologist to rule out ocular pathology.