

<b>Case Number:</b>	CM14-0113332		
<b>Date Assigned:</b>	08/01/2014	<b>Date of Injury:</b>	07/12/2007
<b>Decision Date:</b>	09/10/2014	<b>UR Denial Date:</b>	07/10/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/18/2014

### 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 Practice and is licensed to practice in Texas and Georgia. 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 38-year-old female who reported an injury on 07/12/2007. The mechanism of injury was not provided for review. The injured worker ultimately underwent fusion surgery at the L5-S1 level. The injured worker's postoperative treatment history included the use of a multi stim TENS unit, acupuncture, physical therapy and multiple medications. There were no recent clinical evaluations provided for review to support the injured worker has any physical deficits that require medication management. Most recent medical documentation submitted for review was review of records and a discussion by the primary treating physician on 12/02/2013. This did not involve a face to face examination of the injured worker. A request was made for GI and urology consults. However, no justification for the request was provided.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**GI Consult:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) 7, page(s) 127.

**Decision rationale:** American College of Occupational and Environmental Medicine recommends specialty consultations when the injured worker's diagnosis is complex or there are comorbidities to contribute to a delay in recovery. The clinical documentation submitted for review did not include a recent assessment of the patient to support the need for a specialty consultation. There is no indication that the injured worker's treating provider has exhausted all resources within his scope of practice and requires additional expertise. As such, the requested GI consult is not medically necessary or appropriate.

**Urology Consult:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) 7, page(s) 127.

**Decision rationale:** American College of Occupational and Environmental Medicine recommends specialty consultations when the injured worker's diagnosis is complex or there are comorbidities to contribute to a delay in recovery. The clinical documentation submitted for review did not include a recent assessment of the patient to support the need for a specialty consultation. There is no indication that the injured worker's treating provider has exhausted all resources within his scope of practice and requires additional expertise. As such, the requested urology consult is not medically necessary or appropriate.