

<b>Case Number:</b>	CM14-0131148		
<b>Date Assigned:</b>	08/20/2014	<b>Date of Injury:</b>	03/19/2007
<b>Decision Date:</b>	10/03/2014	<b>UR Denial Date:</b>	07/22/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/15/2014

### 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 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:

The injured worker is a 58 year old female who was injured on 03/19/07. It was noted that s\the injured worker slipped and fell in December 2013, sprained both ankles, and the left ankle is still painful. The mechanism of injury is not described. The injured worker complains of pain and discomfort about multiple body parts, primarily in the bilateral feet. The injured worker is status post second and third web space neuroma excisions and status post redo of a left foot second web space stump neuroma excision. Records indicate the claimant would like to consider redoing the left third web space neuroma excision. The injured worker also complains of a flareup in low back pain which she reportedly believes is due to abnormal gait resulting from foot pain. The injured worker presented for a pre operative evaluation on 06/03/14 in preparation for a redo of a left foot stump neuroma excision at the third web space. As this record notes, however, the injured worker reports an illness and requests to postpone the surgery. The most recent clinical note is dated 07/02/14 and is handwritten and largely illegible. Notes in the margin appear to read. Consult surgeon left foot neuroma excision revision Towne Brocks Syndrome (TBS). This note reveals a treatment plan/request for authorization for acupuncture twice per week for three weeks about the lumbar region for acute flare up and (illegible) to proceed with [left] foot surgery. Further handwritten notes state, Acute flare up low back pain (LBP) felt patient must get through cold and decrease LBP prior to proceeding with surgery patient agreed. A request for six sessions of acupuncture and a surgical consult is submitted on 07/15/14 and subsequently denied by utilization review dated 07/22/14 citing insufficient documentation regarding the request for surgical consult and insufficient details upon medical history and examination to support acupuncture. This is an appeal request for six sessions of acupuncture and a surgical consult.

## IMR ISSUES, DECISIONS AND RATIONALES

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

**Acupuncture 6 sessions.:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Acupuncture Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Acupuncture Treatment Guidelines.

**Decision rationale:** Medical Treatment Utilization Schedule (MTUS) Acupuncture Medical Treatment Guidelines state acupuncture is used as an option when pain medication is reduced or not tolerated, it may be used as an adjunct to physical rehabilitation and/or surgical intervention to hasten functional recovery. Records appear to reveal the requested acupuncture is to address the injured worker's complaints of low back pain. Records do not indicate the injured worker cannot tolerate medications or has reduced medications. Records do not indicate the claimant is currently participating in a formal physical therapy program or a home exercise program. Records do not indicate the injured worker has been instructed to begin such treatment. Records do not indicate surgical intervention for the low back is planned. Based on the clinical information provided, medical necessity of six sessions of acupuncture is not established.

**Surgical consult.:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Guidelines.

**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), Chapter 7 - Independent Examinations and Consultations, page 503

**Decision rationale:** The request for a surgical consult is not recommended as medically necessary. American College of Occupational and Environmental Medicine (ACOEM) states, the occupational health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial factors are present, or when the plan or course of care may benefit from additional expertise. Records indicate the injured worker has a stump neuroma about the third web space of the left foot which requires excision. Per the records, the injured worker attended a surgical consultation in preparation for this surgical excision on 06/03/14 but reported an illness at the time and the surgery was postponed. It is noted that the treating providers have suggested the injured worker recover from illness and achieve resolution of a flare up of low back pain prior to proceeding with left foot surgery. Records do not indicate these prerequisites have been met. As such, the request for a surgical consult is premature. Based on the clinical information provided, medical necessity of a surgical consult is not established.

