

Case Number:	CM14-0136681		
Date Assigned:	09/03/2014	Date of Injury:	07/10/2013
Decision Date:	10/07/2014	UR Denial Date:	08/14/2014
Priority:	Standard	Application Received:	08/25/2014

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:

This is a 46-year-old female with a date of injury of 7/10/13. The mechanism of injury occurred when she hit her elbow on a window while working and felt immediate right elbow pain. On 5/12/14 she had right elbow surgery and completed 5 post-op physical therapy sessions. On 6/27/14 it was noted her medications included Naprosyn and Norco. On 7/28/14 the notes states her visit was for a TENS trial. She complained of persistent pain in the right elbow associated with weakness, numbness, and tingling in the fingers. She has completed 5 physical therapy post-op sessions and is currently taking oral meds for severe pain. She stated the pain was 4/10 prior to TENS use and 2/10 following use. On exam showed surgical scar over the lateral right elbow, with tenderness to palpation. There was decrease grip strength in the right hand. The current plan is for TENS trial, dispensed on this date for home use and acupuncture therapy for 6 sessions. The diagnostic impression is s/p right elbow surgery and right elbow sprain/strain. Treatment to date: surgery right elbow 5/12/14, physical therapy, medication management. A UR decision dated 8/14/14 denied the retrospective request for TENS unit trial (DOS 7/28/14). The retro request was denied because guidelines do not recommend TENS unit for chronic pain as a primary treatment modality, but a one-month home based TENS trial may be considered. As a noninvasive conservative option if used as an adjunct to a program of evidence-based functional restoration. The provider dispensed the TENS unit for home use. However, it was not clear that the patient had utilized this TENS units in the clinical setting with subsequent specific and sustained functional benefit. Furthermore, there was limited documentation of significant issues or functional deficits, which would have demonstrated benefit from the use of this passive device. Based on the clinical findings, documentation, and evidence based guidelines the medical necessity of this request is not established.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective request for TENS unit trial (DOS 7/28/14): Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines TENS for chronic pain (transcutaneous electrical nerve stimulation).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 116.

Decision rationale: The CA MTUS states that TENS is recommended as a treatment option for acute post-operative pain in the first 30 days post-surgery. However, transcutaneous electrical nerve stimulation (TENS) appears to be most effective for mild to moderate thoracotomy pain. TENS units were shown to be of lesser effect, or not at all, for other orthopedic surgical procedures. However, the patient had surgery on 5/12/14, with at least 5 post-op PT sessions noted. There is little information regarding the patient's treatment history including the use of a TENS unit in physical therapy, medication management, or instruction and compliance with an independent home program exercise program. In addition, guidelines support the use of TENS as a treatment option for acute post-op pain in the first 30 days post-op. She had elbow surgery on 5/12/14, which would be approximately 76 days post-op to the TENS retro request DOS on 7/28/14. It is unclear if the patient had used the TENS unit in a clinical setting with subsequent functional benefit if any. In addition, the request does not specify a time limit for the trial TENS unit. Therefore, the retrospective request for TENS Unit trial (DOS 7/28/14) was not medically necessary.