

Case Number:	CM14-0150701		
Date Assigned:	09/19/2014	Date of Injury:	04/01/1998
Decision Date:	11/20/2014	UR Denial Date:	08/15/2014
Priority:	Standard	Application Received:	09/16/2014

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 Otolaryngology 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:

Patient is a 58 year old female with chronic rhinosinusitis - paranasal sinus polyposis, asthma and aspirin allergy - so called Samter's triad. She has undergone endoscopic sinus surgery at least 3 times - first in 2012, then revisions in 2013 and 2014. At follow up office visits post op she has undergone repeated nasal endoscopy with debridement. Most recent culture did not reveal any fungal elements and pathology showed only changes consistent with nonspecific chronic sinusitis. CT report included is from 3 days prior to most recent surgery in March. This showed presence of continued mucosal disease as well as opacification of the frontal sinuses. Request for coverage for sinus endoscopy with debridement is now being denied. This does not appear to be a request for further revision endoscopic sinus surgery.

IMR ISSUES, DECISIONS AND RATIONALES

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

Nasal sinus endoscopy with bilateral debridement: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Reliability of EP3OS symptom criteria and nasal endoscopy in the assessment of chronic rhinosinusitis-a GA2LEN study. Allergy, 66 (4), 556-561

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lee JY, Byun JY. Relationship between the frequency of

postoperative debridement and patient discomfort, healing period, surgical outcomes, and compliance after endoscopic sinus surgery. *Laryngoscope*. 2008;118(10):1868-72. 2. Kuhn FA. Role of endoscopy in the management of chronic rhinosinusitis. *Ann Otol Rhinol Laryngol Suppl*. 2004;193:15-8.

Decision rationale: In office nasal and paranasal sinus endoscopy is used for diagnosis and performance of minor procedures in patients with chronic rhinosinusitis. Post-operative endoscopy and debridement is standard of care for these patients. The frequency and length of time this is done is individualized depending upon extent of disease. This patient has been documented to have severe chronic disease and the use of endoscopy with debridement is medically indicated for control of symptoms and determination of optimal medical therapy.