

Case Number:	CM14-0155017		
Date Assigned:	09/25/2014	Date of Injury:	04/27/2011
Decision Date:	11/06/2014	UR Denial Date:	09/12/2014
Priority:	Standard	Application Received:	09/22/2014

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:

The injured worker is a 26-year-old male who sustained an injury on April 27, 2011. He is diagnosed with musculoligamentous strain of the lumbar spine; history of traumatic partial dislocation, relocation of the left shoulder; post traumatic injury to the axillary nerve, posterior trunk of the brachial plexus with residual neuropathy and shoulder girdle atrophy, partial recovery; and bilateral carpal tunnel syndrome. He was seen for an evaluation on June 26, 2014. He presented with complaints of pain, weakness, and numbness to the left upper extremity. The pain was rated 7/10. He also complained of low back pain. The examination of the lumbar spine revealed tenderness over the paraspinal muscles. There were 2+ muscle spasms noted. The range of motion was decreased. The straight leg raising test was positive at 45 degrees on the right. The examination of the bilateral hands revealed notable atrophy of the thenar and hypothenar eminence. There was tenderness over the transverse carpal ligament in both hands. Decreased sensation was noted at the left hand in both ulnar and median nerve distribution. There was decreased sensation in the right hand over the median nerve distribution. The Tinel's sign was positive bilaterally. The examination of the left shoulder revealed atrophy over the supraspinatus and infraspinatus muscle. There was also atrophy over the anterolateral aspect of the deltoid. There was discomfort with range of motion.

IMR ISSUES, DECISIONS AND RATIONALES

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

Cognitive Test: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Functional Restoration Approach to Chronic Pain Management Page(s): 7.

Decision rationale: The request for a cognitive test is not medically necessary at this time. According to the Chronic Pain Medical Treatment Guidelines, functional restoration is an established treatment approach that aims to minimize the residual complaints and disability resulting from acute and/or chronic medical conditions. Functional restoration can be considered if there is a delay in return to work or a prolonged period of inactivity. Functional restoration is the process by which the individual acquires the skills, knowledge and behavioral change necessary to avoid preventable complications and assume or re-assume primary responsibility ("locus of control") for his/her physical and emotional well-being post injury. The individual thereby maximizes functional independence and pursuit of vocation, as measured by functional improvement. In this case, the medical necessity was not established based on the reviewed medical records. The purpose of the test was also not provided. Hence, the request for cognitive test is not necessary at this time.