

Case Number:	CM14-0156938		
Date Assigned:	09/29/2014	Date of Injury:	07/19/2011
Decision Date:	10/27/2014	UR Denial Date:	09/23/2014
Priority:	Standard	Application Received:	09/25/2014

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 General Surgery 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 60 year old male was injured 7/19/11. A nasal septoplasty was done. He was seen 3/31/14 following septoplasty and sinusotomy complaining of nighttime nasal congestion. On examination there was slight right deviation. He was again seen on routine follow up 7/25/14 still with the same complaint. On examination the septum was midline. The patient was asked to return in another 6 months. The patient has apparently been noted to have a slight residual nasal septal deviation. The request was for nasal septoplasty.

IMR ISSUES, DECISIONS AND RATIONALES

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

Septoplasty: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Head

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Septoplasty - Author: Deborah Watson, MD; Chief Editor: Arlen D Meyers, MD; Medscape; Updated 2/11/13 Medical Therapy

Decision rationale: Nasal airway breathing can be improved in the setting of allergic rhinitis and congested nasal mucosa by using intranasal phenylephrine (Neo-Synephrine) for several days, followed by a longer-term use of a steroid nose spray. Nasal septal revision was really what was being requested. The complaint appears to be nasal congestion. There is not a record of conservative management to establish medical necessity for a revision. Therefore, Septoplasty is not medically necessary.