

Case Number:	CM14-0159243		
Date Assigned:	10/02/2014	Date of Injury:	04/16/1980
Decision Date:	10/30/2014	UR Denial Date:	09/18/2014
Priority:	Standard	Application Received:	09/29/2014

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 claimant was injured on 04/16/80. An interferential unit and supplies for 2 months are under review. She was evaluated on 09/09/14 and complained of increased low back pain for the last several weeks. She also had pain shooting down her left buttock, thigh, and leg with nausea and tingling in the left foot on the top. The Motrin wasn't helping. The Electronic Muscle Stimulator (EMS) unit was no longer working. She had tenderness with hypertonicity and left sacroiliac low back pain was increased with straight leg raise on the left. FABER test on the left caused increased pain. There were some paresthesias also. She was diagnosed with lumbosacral sprain with lower extremity radiculopathy and x-rays were negative. An MRI was ordered. Motrin gave no help and she was prescribed Ultram. She was doing some home exercises and walking. Acupuncture has helped in the past.

IMR ISSUES, DECISIONS AND RATIONALES

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

Interferential unit & supplies for 2 months: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Interferential Current Stimulation (ICS).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Interferential Current Stimulation Page(s): 149.

Decision rationale: The history and documentation do not objectively support the request for an interferential current stimulator and supplies for two months. The MTUS state "Interferential Current Stimulation (ICS) is not recommended as an isolated intervention. There is no quality evidence of effectiveness except in conjunction with recommended treatments, including return to work, exercise and medications, and limited evidence of improvement on those recommended treatments alone. The randomized trials that have evaluated the effectiveness of this treatment have included studies for back pain, jaw pain, soft tissue shoulder pain, cervical neck pain and post-operative knee pain. (Van der Heijden, 1999) (Werner, 1999) (Hurley, 2001) (Hou, 2002) (Jarit, 2003) (Hurley, 2004) (CTAF, 2005) (Burch, 2008) The findings from these trials were either negative or non-interpretable for recommendation due to poor study design and/or methodologic issues. In addition, although proposed for treatment in general for soft tissue injury or for enhancing wound or fracture healing, there is insufficient literature to support Interferential current stimulation for treatment of these conditions. There are no standardized protocols for the use of interferential therapy; and the therapy may vary according to the frequency of stimulation, the pulse duration, treatment time, and electrode-placement technique. Two recent randomized double-blind controlled trials suggested that ICS and horizontal therapy (HT) were effective in alleviating pain and disability in patients with chronic low back pain compared to placebo at 14 weeks, but not at 2 weeks. The placebo effect was remarkable at the beginning of the treatment but it tended to vanish within a couple of weeks."In this case, there is no evidence that the claimant has not responded to other treatment methods and new medications have been recommended. Also, she started acupuncture in September and there is no evidence that it has not been beneficial as it had been in the past. It is not clear whether she has been advised to continue her exercise program in conjunction with use of an IF unit. There is no documentation of a successful trial of an IF unit. The medical necessity of this request for an IF unit and supplies for two months has not been clearly demonstrated.