

<b>Case Number:</b>	CM14-0174150		
<b>Date Assigned:</b>	10/28/2014	<b>Date of Injury:</b>	12/27/2012
<b>Decision Date:</b>	12/10/2014	<b>UR Denial Date:</b>	10/06/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/22/2014

### 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 Orthopedic 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 is a 49-year-old male with a 12/27/12 date of injury, when he sustained injuries to the right upper extremity while carrying heavy bags. The patient underwent right carpal tunnel release on 9/13/13. The patient was seen on 9/5/14 with complaints of constant sharp and stabbing pain in the hands with numbness and tingling. The patient also reported frequent migraine headaches and stated that his condition did not improve. The patient was attending physical therapy and was noted to be on Norco, Ultram ER, Cymbalta, Gabacyclotram and Flurbi cream. The physical examination findings were not documented. The diagnosis is status post right carpal tunnel release, right upper extremity complex regional pain syndrome type I, left carpal tunnel syndrome and bilateral epicondylitis. Treatment to date: right carpal tunnel release, work restrictions, physical therapy, flexion glove and medications. An adverse determination was received on 10/6/14 given that there was no evidence to support the use of cytokine DNA testing for the diagnosis of chronic pain.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Comprehensive Molecular Diagnostic Testing- DNA Testing:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Cytokine DNA Testing

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain Chapter Cytokine DNA testing

**Decision rationale:** CA MTUS does not address this issue. ODG states that cytokine DNA testing is not recommended. There is no current evidence to support the use of cytokine DNA testing for the diagnosis of pain, including chronic pain. Cellular mechanisms are ultimately involved in the inflammatory process and healing, and the molecular machinery involves cellular signaling proteins or agents called cytokines. Given rapid developments in cytokine research, novel applications have emerged and one application is cytokine DNA signature testing which has been used as a specific test for certain pain diagnoses such as fibromyalgia or complex regional pain syndrome. The specific test for cytokine DNA testing is performed by the [REDACTED] [REDACTED]. Two articles were found on the website. However, these articles did not meet the minimum standards for inclusion for evidence-based review. In a research setting, plasma levels of various cytokines may give information on the presence, or even predictive value of inflammatory processes involved in autoimmune diseases such as rheumatoid arthritis. However, the patient complained of constant sharp and stabbing pain in both hands, the Guidelines clearly state that there is no current evidence to support the use of cytokine DNA testing for the diagnosis of chronic pain. In addition, there is no rationale with regards to the necessity for cytokine testing for the patient. Therefore, the request for Comprehensive Molecular Diagnostic Testing- DNA Testing is not medically necessary.