

Case Number:	CM14-0176810		
Date Assigned:	10/30/2014	Date of Injury:	08/01/2014
Decision Date:	12/05/2014	UR Denial Date:	09/22/2014
Priority:	Standard	Application Received:	10/24/2014

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 Internal 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:

This is a case of a 66 year old female with a date of injury of 8/1/2014. In the doctors first report dated 9/10/2014 by [REDACTED], it is reported that the patient suffered a neck injury after doing repetitive work at a desk including using a telephone with the phone cradled between her ear and shoulder, computer work and performing data entry, and utilizing a mouse and keyboard on a desktop that required her to reach up and forward. The patient's subjective complaints were right forearm, wrist and hand pain with atrophy of the extensor muscles and numbness and tingling, right shoulder and arm pain, neck pain, lower back pain and headaches. On cervical spine physical examination there is noted straightening of the normal cervical lordotic curvature and anterior head carriage. Tenderness to palpation with muscle guarding is present over the suboccipital muscles, cervical paraspinal musculature and upper trapezius muscles, bilaterally. Axial compression test and Spurling's maneuver elicit increased neck pain without radicular component. Range of motion of the cervical spine notes flexion is 42 degrees, extension is 48 degrees, right rotation is 52 degrees, left rotation is 50 degrees, right lateral flexion is 24 degrees and left lateral flexion is 28 degrees. All deep tendon reflexes were normal. Cervical x-rays revealed slight multilevel degenerative changes. MRI from 9/22/2010 of the cervical spine revealed mild degenerative changes without evidence of significant central canal or neuroforaminal stenosis. EMG/Nerve conduction velocity studies done 1/19/2012, revealed abnormal nerve studies due to severe chronic neurogenic changes in the muscle innervated by the radial nerve likely at the spiral groove as triceps are unaffected. This was evidenced of reinnervation with single unit firing.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI Cervical Spine: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 167.

Decision rationale: Based on MTUS guidelines, the criteria for ordering imaging studies includes: emergence of red flag symptoms, evidence of tissue insult or neurologic dysfunction, failure to progress in program intended to avoid surgery and clarification of anatomy prior to an invasive procedure. In this case, there are no documented red flags symptoms as described in the MTUS guidelines. There was no documentation of cervical radiculopathy either subjectively or objectively. The neurologic findings described appear to be related to an isolated right radial neuropathy. Therefore based on MTUS guidelines and the evidence in this case, the request for MRI of the Cervical Spine is not medically necessary.