

<b>Case Number:</b>	CM14-0183175		
<b>Date Assigned:</b>	11/07/2014	<b>Date of Injury:</b>	12/19/2001
<b>Decision Date:</b>	12/30/2014	<b>UR Denial Date:</b>	10/27/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/03/2014

### 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 has a subspecialty in Nephrology 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 38-year old female with a 12/19/01 injury date. She underwent a 2012 lumbar fusion and continues to be symptomatic with lower back and lower extremity radiating pain. She has apparently had a 120-pound weight gain since the time of injury, and has failed all weight loss attempts. In a 9/17/14 bariatric consultation, the provider noted a body mass index (BMI) of 53.95 and recommended a sleeve gastrectomy. Diagnostic impression: obesity. Treatment to date: lumbar fusion (2012), physical therapy, medications, [REDACTED], [REDACTED], [REDACTED]. A UR decision on 10/27/14 denied the request for sleeve gastrectomy because there was no documentation of BMI or weight at the time of injury or at the time of previous lumbar surgery. In addition, the guidelines state that weight loss is a personal/lifestyle issue and not a worker's comp issue.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Sleeve gastrectomy:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 1 Prevention, Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 11, 83. Decision based on Non-MTUS Citation <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2687048>

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 1 Prevention, Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 83.

**Decision rationale:** CA MTUS states that to achieve functional recovery after an injury, patients must assume certain responsibilities. Weight loss is a personal/lifestyle issue and not a worker's compensation issue. Bariatric surgery is fraught with complications. However, in this case there is a lack of documented BMI, or a height and weight that could be used to calculate a BMI, at the time of the original injury or at the time of the 2012 lumbar surgery. Therefore, it is impossible to verify when the weight gain occurred and how much, how quickly it occurred, and whether the weight gain was associated with work stoppage, lumbar surgery, or other factors. Therefore, the request for sleeve gastrectomy is not medically necessary.