

Case Number:	CM14-0020729		
Date Assigned:	04/30/2014	Date of Injury:	07/27/2012
Decision Date:	07/08/2014	UR Denial Date:	01/30/2014
Priority:	Standard	Application Received:	02/19/2014

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 Family Medicine and is licensed to practice in New Jersey. 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 worker is a 33 year old male who injured his lower back on 7/22/12 while lifting a heavy box. He was diagnosed with lower back strain/sprain, sciatica, lumbar myofascial pain syndrome and lumbar IVD displacement/annular tear without myelopathy at L4-L5 (based on MRI done on 9/24/12). He was treated with oral medications such as NSAIDs and muscle relaxants, epidural steroid injections, topical analgesics, and was given lumbar support, physical therapy, home exercises, and modified work. The history of this worker is vague as far as laboratory testing is concerned. In various progress notes by the treating physician, there is a repeated order for CBC/comprehensive panel and periodic UA toxicology, but no evidence of quantitative chromatography orders or results were found in the notes provided, nor for what purpose it was reportedly ordered.

IMR ISSUES, DECISIONS AND RATIONALES

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

RETROSPECTIVE REQUEST FOR QUANTITATIVE CHROMATOGRAPHY, LOW BACK DOS: 1/10/13: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Non-MTUS <http://www.ncbi.nih.gov/pubmedhealth/PMH0002979>.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline Or Medical Evidence: Pubmed Health, Chromatography, <http://www.ncbi.nlm.nih.gov/pubmedhealth/pmh0002979/>.

Decision rationale: The MTUS and ODG are silent on the use of chromatography. Chromatography is a method of testing which can show the differences in the chemicals you want to separate be it gases, liquids, or ions, commonly used to view different proteins in a test sample. There is certainly lack of clarity with this request, with no mention in the provided documents of which type of chromatography besides quantitative, and other details that might help the reviewer judge for medical necessity. No evidence of the worker's treating physician was found stating this lab request and why. Therefore, without clarifying documentation, the quantitative chromatography is not medically necessary.