

Case Number:	CM14-0022391		
Date Assigned:	05/09/2014	Date of Injury:	11/14/1997
Decision Date:	08/07/2014	UR Denial Date:	01/17/2014
Priority:	Standard	Application Received:	02/21/2014

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 Physical Medicine and Rehabilitation and is licensed to practice in Nevada. 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 injured worker is a 67-year-old male who was reportedly injured on November 14, 1997. The mechanism of injury is not listed in these records reviewed. The most recent progress note dated January 8, 2014, indicates that there are ongoing complaints of difficulty swallowing and constipation. The injured employee was stated to be losing weight and has lost 2 pounds in the last two weeks. There was a normal physical examination. There was a recommendation to see a dietitian or nutritionist as well as a colonoscopy. A request had been made for a colonoscopy and a computed tomography scan of the abdomen/pelvis was not certified in the pre-authorization process on January 17, 2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

COLONOSCOPY: Upheld

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

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:<http://www.uptodate.com/contents/colonoscopy-beyond-the-basics>.

Decision rationale: The indications for colonoscopy includes screening for colon polyps, rectal bleeding, a change in bowel habits, iron deficient anemia, a family history of colon cancer, a personal history of polyps or colon cancer, chronic unexplained abdominal or rectal pain and an abnormal x-ray or computed tomography of the abdomen. Constipation is the main concern of the physician of record for the progress note dated January 8, 2014, who does state that the injured employees constipation is worsened due to his pain medication usage. It is reasonable to believe that discontinuing these medications should be tried first prior to pursuing any procedures. This request for colonoscopy is not medically necessary.

CT SCAN OF THE ABDOMEN/PELVIS: Upheld

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

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: www.acr.org/media/acr/documents/PGTS/guidelines/CT_abdomen_Pelvis.pdf imaging.

Decision rationale: The indications for an abdominal computed tomography (CT) include abdominal pain, evaluation of masses, evaluation of malignancy, liver disease, tumors, complications of surgery, inflammatory processes, obstruction, screening for polyps and clarification of other imaging studies. According to the recent medical record dated January 18, 2014, the injured employee does not have any of these abdominal conditions. This request for a CT scan of the abdomen and pelvis is not medically necessary.