

Case Number:	CM14-0022805		
Date Assigned:	06/11/2014	Date of Injury:	10/15/2009
Decision Date:	07/25/2014	UR Denial Date:	02/13/2014
Priority:	Standard	Application Received:	02/24/2014

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 Physical Medicine & Rehabilitation 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 51 year-old patient sustained an injury on 10/15/09 from a slip and fall while employed by [REDACTED]. Request under consideration include BONE SCAN OF LUMBAR SPINE. The patient is s/p L4-5 and L5-S1 fusion in December 2012. X-rays of the lumbar spine on 7/24/13 showed intact fusion with no motion with flexion and extension. CT scan of the lumbar spine dated 9/26/13 showed fusion at L4-5 without bony union anteriorly at L5-S1. The patient was determined to reach MMI (maximum medical improvement) on 10/9/13 by AME. Report of 1/30/14 from provider noted patient reporting only 15% benefit from the surgery. Recent injection procedure by pain management had increased the pain. Exam showed slight weakness of the plantar flexion and dorsiflexors bilaterally; intact sensation. Treatment request was for the bone scan. The request for BONE SCAN OF LUMBAR SPINE was non-certified on 2/13/14 citing guidelines criteria and lack of medical necessity.

IMR ISSUES, DECISIONS AND RATIONALES

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

BONE SCAN OF LUMBAR SPINE: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 304.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Low Back, Bone Scan, page 376.

Decision rationale: This 51 year-old patient sustained an injury on 10/15/09 from a slip and fall while employed by [REDACTED]. Request under consideration include Bone Scan Of Lumbar Spine. The patient is s/p L4-5 and L5-S1 fusion in December 2012. X-rays of the lumbar spine on 7/24/13 showed intact fusion with no motion with flexion and extension. CT scan of the lumbar spine dated 9/26/13 showed fusion at L4-5 without bony union anteriorly at L5-S1. The patient was determined to reach MMI (maximum medical improvement) on 10/9/13 by AME. Report of 1/30/14 from provider noted patient reporting only 15% benefit from the surgery. Recent injection procedure by pain management had increased the pain. Exam showed slight weakness of the plantar flexion and dorsiflexors bilaterally; intact sensation. Treatment request was for the bone scan. The ACOEM Treatment Guidelines for Low Back Complaints under Special Studies and Diagnostic and Treatment Considerations supports radiographs and/or bone scans when red-flags conditions (i.e.infection, fracture, cancer) are suspected. The patient had an unremarkable Lumbar spine x-rays and recent CT scan showed L4-5 fusion without bony union anteriorly at L5-S1. Subsequently, the AME deemed the patient to have reached MMI without further diagnostic recommendations. Bone scans are not recommended in patients with low back pain in the absence of red flags for serious spinal pathology, even if chronic pain persists. However, it may be appropriate when the physician believes it would aid in patient management when unequivocal objective findings that identify specific nerve compromise on the neurologic examination are evidence; however, submitted clinical reports only noted lumbar exam with essentially intact neurological findings except for unchanged slight weakness without report of new injury, acute flare-up, or red-flag conditions. There is no demonstrated acute findings of neurological deficits or change in clinical condition to warrant for the bone beyond guidelines criteria. The Bone Scan Of Lumbar Spine is not medically necessary and appropriate.