

Case Number:	CM14-0025210		
Date Assigned:	06/11/2014	Date of Injury:	10/11/2011
Decision Date:	07/15/2014	UR Denial Date:	02/10/2014
Priority:	Standard	Application Received:	02/27/2014

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 Orthopedic Surgery, 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:

The injured worker is a 33-year-old female who was reportedly injured on October 11, 2011. The mechanism of injury was having her arm pulled by a student. The most recent progress note dated May 2, 2014 indicates there were ongoing complaints of right shoulder and wrist pain and swelling. There were diagnoses of a cervical spine disc protrusion as well as a lumbar spine disc protrusion, a bilateral elbow sprain of the ulnar collateral ligament, and a bilateral hand sprain/strain.

IMR ISSUES, DECISIONS AND RATIONALES

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

ELECTRO ACUPUNTURE 2 TIMES PER WEEK FOR 4 WEEKS FOR THE RIGHT WRIST: Upheld

Claims Administrator guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 13.

Decision rationale: According to the medical records provided, the injured employee has previously participated in 12 visits of acupuncture, the most recent of which was January 15, 2014. There has been no documentation in the medical record regarding any efficacy or

improvement that has been achieved by these previous acupuncture treatments. It was only stated that the injured employee was able to walk for 20 minutes time. Without additional justification for continued acupuncture, this request is not medically necessary.