

Case Number:	CM14-0028838		
Date Assigned:	06/16/2014	Date of Injury:	10/26/2010
Decision Date:	07/16/2014	UR Denial Date:	02/18/2014
Priority:	Standard	Application Received:	03/06/2014

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 New York. 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 patient is a 51-year-old female who injured her bilateral shoulders and has had tendinitis. Right shoulder MRI September 2000 that shows a full-thickness tear of the supraspinatus tendon. Cervical MRI September 2000 that shows degenerative changes at C5-6 and C6-7. Left shoulder MRI in October 2000 and shows tear of the supraspinatus tendon. The patient has been treated with two-level anterior cervical discectomy fusion surgery. At issue is whether 2 day hospital stay is medically necessary after cervical fusion surgery.

IMR ISSUES, DECISIONS AND RATIONALES

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

RETROACTIVE INPATIENT HOSPITAL STAY QUANTITY: 1.00 (DATE OF SERVICE: 2/6/14): 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:ODG 18th Edition Cervical fusion- 1 day hosp stay.

Decision rationale: Guidelines are consistent with a one day hospital stay for two-level anterior cervical discectomy and fusion surgery. The medical records indicate that this patient had an

uncomplicated two-level anterior cervical fusion. Therefore 2 day postoperative hospital stay is not medically necessary.