

<b>Case Number:</b>	CM14-0031210		
<b>Date Assigned:</b>	07/02/2014	<b>Date of Injury:</b>	05/16/2007
<b>Decision Date:</b>	07/31/2014	<b>UR Denial Date:</b>	01/14/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/28/2014

### 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 Internal Medicine 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 patient had a worker's comp injury on 5/16/07 that resulted from an electrical burn injury causing bilateral wrist pain and neuropathic pain. He had a normal Electromyography (EMG) test of his upper extremities on 10/12. He was noted in 2013 to still be complaining of hand and wrist problems. The PR2 note of 12/23/13 noted that the patient had continual pain and numbness and tingling of his both hands and that swelling was also noted in both hands. Physical exam confirmed numbness of both hands and decreased sensation of both hands except for the right thumb. The PCP noted that the numbness and decrease in sensation was worse and had become more progressive. He also noted that the swelling was also worse than before. A new EMG was requested because of the increase in symptoms and (ESR) Erythrocyte Sedimentation Rate and Complete Blood Count (CBC) was requested because of the new prominence of soft tissue swelling that was noted. However, the Utilization Review (UR) denied these requests.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**NCS, BILATERAL UPPER EXTREMITIES:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation (ODG) Official Disability Guidelines.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 261, 303, 304.

**Decision rationale:** The MTUS states that Electromyography (EMG) may be helpful in identifying subtle, focal neurological dysfunction in patients with lumbar pain more than 3 to 4 weeks. It also states that it is useful in diagnosing disc protrusion and 1 in the diagnosis of cauda equina, spinal stenosis, or post laminectomy syndrome. The MTUS also states that Nerve Conduction Study (NCS) or EMG may be appropriate in helping to differentiate between carpal tunnel syndrome and other conditions such as cervical radiculopathy. In this case the patient was noted to have increase in numbness in his fingers since his previous EMG. Therefore it is possible that another condition had developed in the interim and it was appropriate to screen for another disease process such as carpal tunnel syndrome needing surgery in order to avoid nerve damage or a disc which might need surgical intervention in order to avoid further neurological impairment. EMG would be beneficial in screening for such pathological entities and it was medically necessary and appropriate.

**SED rate, Complete Blood Count CBC:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Assessment Approaches, History & Physical Examination (for labs).

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints, Chapter 13 Knee Complaints Page(s): 208, 331.

**Decision rationale:** MTUS states that (ESR) Erythrocyte Sedimentation Rate and Complete Blood Count (CBC) may be useful to screen for inflammatory or autoimmune sources of joint pain. Also it states that severe pain on motion, systemic signs of infection, local swelling, and heat as well as elevated SED RATE and CBC could be signs of septic arthritis. In this case we note that the patient had swelling of his hands which had increased recently. Therefore, It was necessary to screen for other pathologies such as new septic arthritis or autoimmune disease and therefore the ordering of CBC and SED RATE is medically necessary and appropriate.