

<b>Case Number:</b>	CM14-0032181		
<b>Date Assigned:</b>	06/20/2014	<b>Date of Injury:</b>	02/24/2012
<b>Decision Date:</b>	07/30/2014	<b>UR Denial Date:</b>	02/27/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/13/2014

### 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 Maryland. 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 employee was a 52 year old female who was being treated for neck and low back pain. The date of injury was 02/25/12 and the mechanism of injury was pain in back while attempting to pull 45 pound boxes. Her diagnoses included lumbar spine sprain and strain with herniated nucleus pulposus and radiculitis, cervical spine/strain and anxiety/depression. Her medications included Norco, Prilosec, Zanaflex, Anaprox and her other treatments included lumbar spine epidural steroid injections. She also had facet blocks done at L3-L4, L4-L5 and L5-S1 bilaterally, extensive physical therapy, NSAIDs and activity modification. The most recent progress notes from April 24th, 2014 reported subjective symptoms of back pain that was worse at night. Objective findings included decreased range of motion of spine and positive Spurling's test. The plan included MRI cervical and lumbar spine, EMG/NCS and medications including Norco and Ambien. She was not working. Urine toxicology testing done on 10/17/2013, 11/21/2013, 12/19/2013, 01/30/14 and 03/13/14 were negative except for Tramadol. The request was for drug testing with quantitative chromatography.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**CHROMATOGRAPHY, QUANTITATIVE:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints, Chronic Pain Treatment Guidelines Drug testing Page(s): 43.

**Decision rationale:** The employee was being treated for lumbar and cervical sprain as well as strain. The current treatment included Physical therapy, NSAIDs, activity modification, lumbar facet blocks, Norco, Ambien and Zanaflex. There is documentation of drug testing being done on a monthly basis from October through January of 2013. The results were not consistent with the current prescription of Norco. The MTUS guidelines recommend obtaining drug tests intermittently while on Opioids. But the MTUS does not address the frequency with which testing should be done. The ACOEM guidelines recommend urine drug screenings up to 4 times a year while on Opioids as well as for cause like drug intoxication, motor vehicle crash, lost or stolen prescriptions, using more than one provider and selling of medications. In this case, the provider has not discussed or described the results of the urine drug tests that were done during the previous visits. There is no documentation about the need for monthly drug testing. There is also no documentation as to why the results are not consistent with current prescription of Norco. Performing further urine drug testing without clearly ascertaining the result and making further plans doesn't meet guideline criteria. The request for Quantitative Chromatography for Urine Drug Testing is not medically necessary and appropriate.