

Case Number:	CM14-0037615		
Date Assigned:	06/30/2014	Date of Injury:	12/07/2012
Decision Date:	09/12/2014	UR Denial Date:	03/17/2014
Priority:	Standard	Application Received:	03/28/2014

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 Ophthalmology 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 has a diagnosis of visual field constriction, binocular dysfunction, visual spatial disorientation, and unstead gait. The prior request was approved for sensory motor testing, visual field exam, and office visit. However, optokinetic nystagmus testing is not medically necessary.

IMR ISSUES, DECISIONS AND RATIONALES

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

Optokinetic nystagmus test: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines- Treatment in Workers Compensation Head Procedure Summary; <http://www.nlm.nih.gov/medlineplus/ency/article/003879.htm> (last updated 06/28/2012); Official Disability Guidelines- Treatment in Workers Compensation Eye Procedure Summary.

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:Diagnosis and Management of Ocular Motility Disorders, Alec M. Ansons, Helen Davis. Page 126 - Indications for testing the optokinetic system.

Decision rationale: Optokinetic nystagmus (OKN) testing is indicated in suspected gaze palsies, internuclear Ophthalmoplegia, and pursuit abnormality. Documentation is not submitted indicating that the patient has any of the above findings. Results of the sensorimotor exam is not documented therefore, this request is not medically necessary.