

<b>Case Number:</b>	CM14-0040176		
<b>Date Assigned:</b>	06/27/2014	<b>Date of Injury:</b>	01/09/2009
<b>Decision Date:</b>	08/08/2014	<b>UR Denial Date:</b>	03/08/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	04/04/2014

### 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 Virginia. 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:

This is a 72 year old patient who sustained injury on Jan 9 2009 to his right knee and left shoulder. He complained of right knee and hand pain. He was prescribed nonsteroidal anti-inflammatory drugs (NSAIDs) and developed issues with constipation, gastroesophageal reflux disease (GERD) and abdominal pain. He was found to have irritable bowel syndrome after the initial colonoscopy. The patient had ongoing symptoms and was instructed to have a repeat colonoscopy for comparison sake.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Colonoscopy:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Power AM, Talley NJ, Ford AC, Association between constipation and colorectal cancer, systematic review and meta-analysis of observational studies. AM J Gastroenterol 2013. Validation of the Rome III criteria for the diagnosis of irritable bowel syndrome in secondary care.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 3 Initial Approaches to Treatment, Chronic Pain Treatment Guidelines CHAPTER 3,5 AND 7. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence:  
<<http://emedicine.medscape.com/article/1819350->.

**Decision rationale:** Irritable bowel syndrome (IBS) is a common disorder estimated to affect up to twenty percent of adult caucasians with only a small percentage requiring extensive investigations. The standard of care in our country requires the combination of taking a good history, performing a full physical examination, obtaining certain blood tests, an esophagogastroduodenoscopy (EGD) and colonoscopy with biopsies. Prospective studies do substantiate that patients with IBS experience more pain during endoscopic examinations of the colon than do patients with other conditions. A repeat colonoscopy to compare results would not be a medical indication for this invasive procedure. As such, the request is not medically necessary.