

Case Number:	CM14-0041340		
Date Assigned:	06/27/2014	Date of Injury:	01/07/2013
Decision Date:	08/05/2014	UR Denial Date:	03/14/2014
Priority:	Standard	Application Received:	04/03/2014

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 Physical Medicine and Rehabilitation, has a subspecialty in Interventional Spine, 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 is a 57-year-old female with date of injury of 1/7/13. The listed diagnoses per [REDACTED] as of 2/24/14 are lumbar spondylosis with myelopathy, rule out carpal tunnel syndrome (median nerve entrapment at the bilateral wrist), carpal sprain/strain of the bilateral wrist, and anxiety. According to this report, the patient complains of constant moderate to severe pain in the lumbar spine that is described as sharp. The pain is aggravated by sleeping face up, and prolonged standing and sitting. She reports pain and numbness radiating into her left lower extremity. She also reports locking sensation in the back. The patient also complains of constant, slight to moderate pain in the bilateral wrist and hands that is achy and is aggravated by overuse. The patient reports pain and numbness traveling to her upper bilateral extremities including forearms and elbows. The objective finding show there was a +3 spasm and tenderness to the bilateral lumbar paraspinal muscles from L2 to S1 and multifidus, trigger point to the bilateral piriformis muscle, positive Kemp, straight leg raise, and Yeoman's testing.

IMR ISSUES, DECISIONS AND RATIONALES

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

Work Hardening Program: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303, Chronic Pain Treatment Guidelines Work Conditioning, Work Hardening Page(s): 125. Decision based on Non-MTUS Citation ODG(The Official Disability

Guidelines) Low Back (updated 02/13/14) Flexibility;(updated 3/10/14) Education; (updated 02/13/14) Physical Therapy;Carpal Tunnel Syndrome (updated 02/20/14); Forearm, Wrist, & Hand (updated 02/18/14).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 125-126.

Decision rationale: The MTUS Guidelines recommends work hardening/work conditioning this as an option depending on the availability of quality programs. The criteria for admission to a work hardening program includes among other things a functional capacity evaluation to determine the patient's maximal effort, and a job to return to or on-the-job training. In this case, these elements are missing. It appears that the patient recently had five sessions of therapy and the treater may be requesting work hardening to continue the patient's therapy. There does not appear that the patient has a specific job to return to for which work hardening can be beneficial. The treater provides only general goals such as increasing work capacity, activities of daily living, continued work without restrictions, decrease the need for medication, decrease the visual analog scale rating, decreased swelling, and increased measured active range of motion. As such, the request is not medically necessary.