MAXIMUS Federal Services

Case Number:	CM14-0062580		
Date Assigned:	07/11/2014	Date of Injury:	11/21/2006
Decision Date:	08/08/2014	UR Denial Date:	04/03/2014
Priority:	Standard	Application Received:	05/05/2014

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 New York. 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 claimant is a 55 year female who sustained an industrial injury on 11/21/2006. The mechanism of injury was not provided for review. Her diagnoses include bilateral impingement, bilateral rotator cuff syndrome, bilateral superior labrum anterior and posterior tear (SLAP), and s/p arthroscopic surgery of the right shoulder in 2009. She has complaints of gastritis related to her medical therapy. She is on medical therapy with a proton pump inhibitor, Prilosec, and an upper endoscopy has been approved. The treating provider had requested Probiotics # 60 and Gaviscon.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective review of Probiotics #60: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation 1. Rosen's Emergency medicine. 7th edition 2010 pages1137-11522. Sabiston Textbook of Surgery, 19th edition 2012, pages 1012-11663. Clinical Practice. Gastroesophageal Reflux Disease. New England Journal of Medicine 2008.

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: Medscape Internal Medicine 2013: Indications for Probiotics.

Decision rationale: Probiotic bacteria are used to treat or prevent a broad range of human diseases, conditions, and syndromes. In addition, there are areas of medical use that have been proposed for future probiotic applications. Randomized double-blind studies have provided evidence of probiotic effectiveness for the treatment and prevention of acute diarrhea and antibiotic-induced diarrhea, as well as for the prevention of cow milk-induced food allergy in infants and young children. Research studies have also provided evidence of effectiveness for the prevention of traveler's diarrhea, relapsing Clostridium difficile-induced colitis, and urinary tract infections. There are also studies indicating that probiotics may be useful for prevention of respiratory infections in children, dental caries, irritable bowel syndrome, and inflammatory bowel disease. There is no indication for probiotic therapy for the treatment of gastritis. Medical necessity for the requested item has not been established. The requested item is not medically necessary.

Retrospective review of Gaviscon x 1: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation 1. Rosen's Emergency medicine. 7th edition 2010 pages1137-11522. Sabiston Textbook of Surgery, 19th edition 2012, pages 1012-11663. Clinical Practice. Gastroesophageal Reflux Disease. New England Journal of Medicine 2008.

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: Medscape Internal Medicine 2013: Indications for Antacid therapy.

Decision rationale: The calimant has gastritis and is treated with Prilosec. Antacid therapy is controversial in the management of nonulcer dyspepsia or nonsteroidal anti-inflammatory drug related upper gastrointestinal mucosal damage. Undoubtedly, antacids have major roles to play in the treatment of gastric acid related disorders. The specific indication for Gaviscon therapy has not been established. The requested item is not medically necessary.