

<b>Case Number:</b>	CM14-0068146		
<b>Date Assigned:</b>	09/05/2014	<b>Date of Injury:</b>	04/15/2009
<b>Decision Date:</b>	10/08/2014	<b>UR Denial Date:</b>	04/18/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	05/12/2014

### 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 Orthopedic Surgery 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:

45-year-old female with reported industrial injury of April 15, 2009. MRI cervical spine from January 6, 2014 demonstrates disc degeneration with signal abnormality in the cervical cord at C7 suggestive of a syrinx. canal stenosis is noted at C4-5 which is mild in nature, C5-6 which is mild to moderate and C6-7 which is mild in nature. Exam note from March 6, 2014 demonstrates persistent neck pain. examination the cervical spine demonstrates decreased range of motion in all planes. Moderate tenderness to palpation is noted over the cervical spine. Sensation was diminished to light touch and pinprick in the right C5, C6, C7 and C8 dermatomes. Spurling's test was negative bilaterally as noted in the records. Request is made for artificial disc replacement at C5-C6. No discussion is made in the record regarding muscle spasm or cramping.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Cervical Artificial Disk replacement at C5-C6: Upheld**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG Neck & Upper Back, Disc prosthesis

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Neck, Disc prosthesis

**Decision rationale:** CA MTUS/ACOEM is silent on issue of disc replacement. According to the ODG, Neck section, disc prosthesis, is under study. It is not recommended as there are no long-term studies noting ongoing response reported following disc replacement. In addition artificial disc replacement is indicated for single level disease which is not present in the MRI report from 1/6/14. The guidelines does not support the requested procedure. The request for cervical disc replacement of the cervical spine is not medically necessary and appropriate.

**Orphenadrine Citrate 100mg ER #60:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Muscle relaxants (for pain), Antispasmodics Page(s): 64-65.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 64-65.

**Decision rationale:** CA MTUS Chronic Pain Medical Treatment Guidelines, pages 64-65 reports that muscle relaxants such as Orphenadrine are recommended to decrease muscle spasm in condition such as low back pain although it appears that these medications are often used for the treatment of musculoskeletal conditions whether spasm is present or not. The mechanism of action for most of these agents is not known. As the patient has no evidence in the records of significant spasms objectively, the determination is for non-certification for Orphenadrine as it is not medically necessary and appropriate.