

Case Number:	CM14-0069522		
Date Assigned:	07/14/2014	Date of Injury:	01/24/2012
Decision Date:	09/10/2014	UR Denial Date:	04/16/2014
Priority:	Standard	Application Received:	05/14/2014

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 Geriatrics 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 injured worker is a 59 year old woman with a date of injury of 1/24/12. She was seen by her provider on 3/26/14 with complaints of elbow pain with increased numbness in her bilateral wrists and hands. She also had dysesthesias radiating down both arms and into her thumb, middle and index finger. Her exam showed a positive median nerve compression and Phalen test with dysesthesias along her right and left forearms. Her diagnoses were carpal tunnel syndrome and lateral epicondylitis of elbow, possible flare up of carpal tunnel syndrome. At issue is the request for Electromyography (EMG)/Nerve Conduction Velocity (NCV) of bilateral wrists.

IMR ISSUES, DECISIONS AND RATIONALES

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

Electromyogram (EMG) right wrist: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 253-273.

Decision rationale: This injured worker already has a diagnosis of carpal tunnel syndrome confirmed on physical exam with positive provocative tests. Electromyography (EMG)/Nerve Conduction Velocity (NCV) can be beneficial in diagnosing abnormalities at the wrist after

failure of conservative treatment. The request is due to a 'possible flare-up' and the records do not document that she has failed conservative treatment or how the EMG/NCV will change management. The medical necessity of a right wrist EMG is not substantiated.

Electromyogram (EMG) left wrist: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 253-273.

Decision rationale: This injured worker already has a diagnosis of carpal tunnel syndrome confirmed on physical exam with positive provocative tests. Electromyography (EMG)/Nerve Conduction Velocity (NCV) can be beneficial in diagnosing abnormalities at the wrist after failure of conservative treatment. The request is due to a 'possible flare-up' and the records do not document that she has failed conservative treatment or how the EMG/NCV will change management. The medical necessity of a left wrist EMG is not substantiated.

Nerve Conductive Velocity (NVC) right wrist: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 253-273.

Decision rationale: This injured worker already has a diagnosis of carpal tunnel syndrome confirmed on physical exam with positive provocative tests. EMG/NCV can be beneficial in diagnosing abnormalities at the wrist after failure of conservative treatment. The request is due to a 'possible flare-up' and the records do not document that she has failed conservative treatment or how the EMG/NCV will change management. The medical necessity of a right wrist NCV is not substantiated.

Nerve Conductive Velocity (NVC) left wrist: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 253-273.

Decision rationale: This injured worker already has a diagnosis of carpal tunnel syndrome confirmed on physical exam with positive provocative tests. EMG/NCV can be beneficial in diagnosing abnormalities at the wrist after failure of conservative treatment. The request is due to a 'possible flare-up' and the records do not document that she has failed conservative treatment or

how the EMG/NCV will change management. The medical necessity of a left wrist NCV is not substantiated.