

Case Number:	CM14-0070643		
Date Assigned:	07/14/2014	Date of Injury:	05/18/2005
Decision Date:	08/14/2014	UR Denial Date:	05/09/2014
Priority:	Standard	Application Received:	05/15/2014

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 Surgeon and Hand Surgeon, and is licensed to practice in Texas. 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 38-year-old male who reported injury on 05/18/2005. The mechanism of injury was a loose tree branch fell on the side of the injured workers face. The injured worker suffered a fracture of the left zygomatic arch. Prior treatments were not provided. There was no DWC Form RFA or PR-2 submitted for the requested procedure. There was no objective physical examination submitted for review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Right shoulder Arthroscopy with Open Subacromial Decompression and Mumford procedure, outpatient: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints Page(s): 209-211.

Decision rationale: The ACOEM Guidelines indicate surgical consultations may be appropriate for injured workers who have red flag conditions, activity limitation for more than 4 months, failure to increase range of motion and strength of the musculature around the shoulder and clear clinical and imaging evidence of a lesion that has been shown to benefit in both the short and

long term from surgical repair. The clinical documentation submitted for review did not provide documentation of the above criteria. There was no objective physical examination related to the shoulder that was supplied for review. There was no DWC Form RFA or PR-2 submitted for the requested procedure. There was no MRI submitted for review. Given the above, the request for right shoulder arthroscopy with open subacromial decompression and Mumford procedure outpatient is not medically necessary.