

<b>Case Number:</b>	CM14-0073287		
<b>Date Assigned:</b>	06/30/2014	<b>Date of Injury:</b>	08/11/2009
<b>Decision Date:</b>	07/29/2014	<b>UR Denial Date:</b>	03/24/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	04/07/2014

### 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:

The injured worker is a 68 year old female with chronic low back pain, lumbar discogenic disease and cervical discogenic disease. Lumbar spinal fusions and cervical spinal fusions have been performed, however, dates of surgery are not noted on available notes. The date of injury is August 11, 2003. Primary treating physician progress notes dated August 29, 2013, January 9, 2014, February 20, 2014 and April 17, 2014 were reviewed. Also reviewed were MRI reports of the cervical and lumbar spine performed on January 22, 2014. The request is for retrospective authorization for cervical and lumbar MRIs.

### IMR ISSUES, DECISIONS AND RATIONALES

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

#### **Retrospective MRI of the cervical spine (DOS 1/22/14): Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 177-178. Decision based on Non-MTUS Citation ODG-TWC (Official Disability Guidelines- Treatment in Workers' Compensation), Neck and Upper Back Procedure Summary (updated 12/16/2013).

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

**Decision rationale:** Progress notes dated August 29, 2013 reports the physical exam of the cervical spine as tenderness to palpation of the cervical trapezial junction/midline and cervical facet joint C4-C7, severe trapezial tightness and spasm, restricted range of motion. There is a handwritten PR2 form that documents the subjective findings as "unchanged". The MRI of the cervical spine was performed on January 22, 2014. Progress notes February 20, 2014 and April 17, 2014 document similar findings of the cervical spine as the August 29, 2013 report. There is no clinical evidence documented that supports a significant change in symptoms or emergent "red flag" signs. Based on available information provided; the request for cervical spine MRI is not medically indicated.

**Retrospective MRI of the lumbar spine (DOS 1/22/14):** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303. Decision based on Non-MTUS Citation ODG-TWC (Official Disability Guidelines- Treatment in Workers' Compensation), Low Back Procedure Summary (updated 2/13/2014).

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

**Decision rationale:** Progress notes dated August 29, 2013 reports the physical exam of the lumbar spine as having bilateral straight leg signs, positive Lasegue test, moderated lumbar spine paraspinal spasm and lumbar spine tenderness to palpation. There is a handwritten PR2 form that documents the subjective findings as "unchanged". Progress notes February 20, 2014 and April 17, 2014 document the same physical findings for the lumbar spine as the August 29, 2013 report. There is no clinical evidence documented that supports a significant change in symptoms or emergent "red flag" signs. Based on available information provided; the request for lumbar spine MRI is not medically indicated.