

Case Number:	CM14-0080476		
Date Assigned:	07/18/2014	Date of Injury:	03/18/2009
Decision Date:	09/16/2014	UR Denial Date:	05/13/2014
Priority:	Standard	Application Received:	06/02/2014

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 Family Medicine and is licensed to practice in Utah. 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 patient is a now 36 year-old female. The patient's date of injury is around 03/2008. The mechanism of injury is described as repetitive duties, including: handwork and typing, phones and writing. The patient has been diagnosed with wrist sprain, elbow sprain, herniated cervical disc, DeQuervains and carpal tunnel. The patient's treatments have included physical therapy, nerve conduction studies, Surgical Intervention and medications. The physical exam findings, dated March 7, 2014 show examination of the cervical spine reveals a decrease lordosis. Palpation of the cervical spine shows tightness, spasms and muscle guarding at the trapezius, sternocleidomastoid and strap muscles. There is no tenderness of the spinal processes of cervical vertebrae. There is no evidence of swelling of the supraclavicular fossa. Positive Spurling's test bilaterally. The patient's medications have included, but are not limited to, Ultram, Anaprox, and Prilosec. The request is for MRI and Acupuncture.

IMR ISSUES, DECISIONS AND RATIONALES

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

Acupuncture sessions (neck, upper back): Upheld

Claims Administrator guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: MTUS treatment guidelines were reviewed in regards to this specific case, and the clinical documents were reviewed. The request is for Acupuncture. The clinical documents state that the patient has had 10 previous sessions of acupuncture. Documentation is lacking with objective measurements and goals with the previous sessions. Current guidelines recommend a total of 6 sessions. According to the clinical documentation provided and current MTUS guidelines; additional sessions of acupuncture is not indicated as a medical necessity to the patient at this time.

MRI of the bilateral shoulders: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM. Decision based on Non-MTUS Citation Official Disability Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Shoulder Complaints, Summary Page(s): 214.

Decision rationale: MTUS treatment guidelines were reviewed in regards to this specific case, and the clinical documents were reviewed. The request is for an MRI. MTUS guidelines state the following: indicated for a patient with limitations of activity after four weeks and unexplained physical findings, such as effusion or localized pain. The clinical documents state that the patient has suspected rotator cuff pathology on the right shoulder. There is an indication for a MRI on the right shoulder. The left shoulder is lacking indications for an MRI evaluation. According to the clinical documentation provided and current MTUS guidelines; an MRI is not indicated as a medical necessity to the patient at this time.