

Case Number:	CM14-0179096		
Date Assigned:	11/03/2014	Date of Injury:	12/04/2013
Decision Date:	01/29/2015	UR Denial Date:	09/23/2014
Priority:	Standard	Application Received:	10/28/2014

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, has a subspecialty in Orthopedic Spine 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 patient is a 43-year-old female with a date of injury of December 4, 2013. The patient is diagnosed with cervical strain, left shoulder impingement, a.c. joint synovitis, and lumbar strain. The patient is awaiting left shoulder arthroscopy and subacromial decompressive surgery with a.c. joint resection. The patient is also awaiting cervical spine decompression and fusion surgery. At issue is whether a Vacutherm unit 21 days rental for cervical surgery is medically necessary.

IMR ISSUES, DECISIONS AND RATIONALES

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

Vacutherm 21 days rental: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Neck Chapter

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: ODG neck pain chapter

Decision rationale: ODG guidelines do not support the use of Vacutherm after cervical spine surgery. The medical literature does not support the use of this device at the cervical spine

surgery. No literature exists to demonstrate that this device improves outcomes after cervical surgery. ODG guidelines do recommend cold packs after shoulder surgery for 7 days, but not Vacutherm for 21 days.