

Case Number:	CM14-0180891		
Date Assigned:	11/06/2014	Date of Injury:	09/24/1998
Decision Date:	01/31/2015	UR Denial Date:	10/13/2014
Priority:	Standard	Application Received:	10/30/2014

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 62-year old woman with a date of injury of 9/24/98. She was seen by her primary treating physician on 9/30/14 with complaints of back pain and form management of her Intrathecal opioid pump. She noted urinary frequency 'which she has had for a long time'. She wakes up many times to empty her bladder at night. She was pleased with her current clinical response to Intrathecal therapy with a pump placed in 2006. Her exam showed limitations in range of motion of the lumbosacral spine. She had a well healed left upper quadrant incision and lumbar incision. Her diagnosis was back pain. She was said to be a low risk category on the basis of all opioid requirements being delivered by the Intrathecal delivery system. At issue in this review is the request for a urology consult for her urinary hesitancy and a Blood draw: alcohol (ethanol) QTY: 2.00, amphetamine or methamphetamine QTY: 1.00, benzodiazepines QTY: 1.00, opiate(s) QTY: 2.00, column chromatography/mass spectrometry QTY: 3.00, chromatography, per 09/30/14 for QTY 1.00, iron QTY: 1.00, cocaine or metabolite QTY: 1.00 per 09/30/14 form.

IMR ISSUES, DECISIONS AND RATIONALES

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

Urology consultation: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Low Back , Office Visits

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 287-310.

Decision rationale: This injured worker was denied a request for urologic referral. Her physical exam reveals reduction in range of motion. There are no red flag symptoms on history or exams which would be indications for immediate referral. Her urinary urgency was said to be present for a long time and her symptoms are not clearly related to her industrial injury. The records do not substantiate the medical necessity for a urology consultation. Therefore, Urology consultation is not medically necessary.

Blood draw: alcohol (ethanol) QTY: 2.00, amphetamine or methamphetamine QTY: 1.00, benzodiazepines QTY: 1.00, opiate(s) QTY: 2.00, column chromatography/mass spectrometry QTY: 3.00, chromatography, per 09/30/14 for QTY 1.00, iron QTY: 1.00, cocaine or metabolite QTY: 1.00 per 09/30/14 form: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines 9792.20-9792.26 Page(s): 43, 77, 78. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Uptodate: testing for drugs of abuse and Causes and diagnosis of iron deficiency anemia in the adult

Decision rationale: The injured worker is a 62 year old woman with a date of injury of 9/24/98. She has no history of substance abuse or anemia. Her opioids are delivered through her Intrathecal pump and she was said to be in a low risk category for her opioid use. Chromatography is a very sensitive and specific means to drugs or metabolites. However, it is usually not a methodology used for initial drugs of abuse testing. Urine drug screening is used more commonly and may be used at the initiation of opioid use for pain management and in those individuals with issues of abuse, addiction or poor pain control. In the case of this injured worker, the records fail to document any issues of abuse or addiction or the medical necessity. Therefore, the Blood draw: alcohol (ethanol) QTY: 2.00, amphetamine or methamphetamine QTY: 1.00, benzodiazepines QTY: 1.00, opiate(s) QTY: 2.00, column chromatography/mass spectrometry QTY: 3.00, chromatography, per 09/30/14 for QTY 1.00, iron QTY: 1.00, cocaine or metabolite QTY: 1.00 per 09/30/14 form is not medically necessary.