

Case Number:	CM14-0203492		
Date Assigned:	12/16/2014	Date of Injury:	07/03/2012
Decision Date:	02/18/2015	UR Denial Date:	11/18/2014
Priority:	Standard	Application Received:	12/05/2014

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:
 State(s) of Licensure: California
 Certification(s)/Specialty: Orthopedic Surgery

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 52 year old female who sustained a work related injury July 3, 2012. A CT scan of the cervical spine without contrast dated August 27, 2014, is present in the case file. According to a primary treating physician's report dated November 6, 2014, on examination the injured worker has exquisite hyperesthesias in the C6/C7 distribution on the right upper extremity, burning dysesthesias throughout the entirety of her hand, unable to fully assess strength due to intractable pain, and clear evidence of give way weakness. Diagnoses: s/p C6-T1 bilateral laminotomy and foraminotomy 7/12/2013 and worsening right upper extremity symptoms. Treatment plan included to proceed with injection to the cervical spine. Work status is documented as remain off work. On October 23, 2014, the primary treating physicians report is the same as above, with the exception of a concern she may have CRPS (chronic regional pain syndrome) or RSD (reflex sympathetic dystrophy syndrome) variance and recommended a CT of the cervical spine. A request for authorization dated October 30, 2014, requests the CT scan of the cervical spine and documents the diagnosis as cervical spondylosis with myelopathy. According to utilization review performed November 18, 2014, on November 7, 2014, a request for a repeat CT scan was denied based on the lack of clear evidence of progression of neurological findings and not evidence of other lesions of the cervical spine. Citing ACOEM guidelines CT scan is recommended for fracture, dislocation, infection, tumor, progressive neurologic deficit, or cord compression. According to Official Disability Guidelines (ODG), CT scan is recommended for suspected or known fracture. It is not suspected that the injured worker sustained a repeat injury since the previous CT scan 8/27/2014 and

documentation does not indicate that this injured worker has progressive neurological injury since the last CT scan. Therefore, the request for CT scan of the cervical spine is non-certified.

IMR ISSUES, DECISIONS AND RATIONALES

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

CT scan, cervical spine: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints.

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

Decision rationale: CA MTUS/ACOEM is silent on the issue of CT scan of the cervical spine. Per the ODG, Neck, Computed Tomography (CT), is indicated for suspected cervical spine trauma and when MRI of the cervical spine is contraindicated. In this case the exam notes from 11/6/14 does not indicate a contraindication to MRI or suspected cervical spine trauma. Therefore the determination is for non-certification.