

Case Number:	CM14-0207102		
Date Assigned:	12/19/2014	Date of Injury:	05/28/2014
Decision Date:	02/10/2015	UR Denial Date:	11/18/2014
Priority:	Standard	Application Received:	12/10/2014

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 Practice 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:

33 yr. old male claimant sustained a work injury on 5/28/14 involving the neck and low back. He was diagnosed with cervical and lumbar strain. A progress note on 10/28/14 indicated the claimant lumbar pain with paramuscle spasms and restricted range of motion. Due to frequent low back pain, the physician requested an MRI of the lumbar spine to evaluate for a herniated nucleus pulposus. On 12/11/14, the claimant had persistent pain with a positive straight leg raise and numbness in the L4-L5 dermatome. An MRI of the lumbar spine was requested again.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 MRI of the lumbar spine: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303, 53,.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 309.

Decision rationale: According to the ACOEM guidelines, an MRI of the lumbar spine is recommended for red flag symptoms such as cauda equine, tumor, infection, or uncertain neurological diagnoses not determined or equivocal on physical exam. In this case, there was no indication of a red flag finding. The exam elicited the anatomical area of lumbar complaints.

There was no reason to suspect a rare neurological diagnosis and there was no plan for surgery.
The MRI is not medically necessary.