

<b>Case Number:</b>	CM14-0086764		
<b>Date Assigned:</b>	07/23/2014	<b>Date of Injury:</b>	05/03/2013
<b>Decision Date:</b>	03/06/2015	<b>UR Denial Date:</b>	05/21/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/09/2014

### 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, Indiana, New York  
 Certification(s)/Specialty: Internal Medicine

### CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This is a 68 female who suffered a work related injury on 05/03/2013. Diagnoses include cervical disc protrusion, cervical sprain/strain, lumbar disc protrusion, and lumbar sprain/strain. Treatment has included medication, physical therapy, acupuncture, and shockwave. In a progress note dated 5/7/2014 the injured worker complains of pain in cervical and lumbar spine with activity and right knee constant moderate achy pain and weakness. The left knee has moderate achy left knee pain, heaviness and weakness. There is tenderness to the lumbar and cervical spine. The request is for Voltage Acuted Sensory Nerve Conduction. Utilization Review dated 05/21/2014 non-certified the request for Voltage-actuated sensory nerve conduction threshold testing, citing Official Disability Guidelines, Treatment in Workers Comp. Sensory nerve conduction threshold device-See current perception threshold testing. Current perception threshold (CPT) testing--not recommended. Please see neck chapter.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**VOLTAGE-ACTUATED SENSORY NERVE CONDUCTION THRESHOLD TESTING:**  
 Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines - no chapter cited

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation  
[http://www.aetna.com/cpb/medical/data/300\\_399/0357.html](http://www.aetna.com/cpb/medical/data/300_399/0357.html)

**Decision rationale:** Pursuant to the Aetna clinical Policy Bulletin, Voltage Actuated Sensory Nerve Conduction Threshold Testing is not medically necessary. Aetna considers quantitative sensory testing (QST), also known as pressure-specified sensory device testing, experimental and investigational for the evaluation of musculoskeletal pain, the management of individuals with neuropathy, prediction of the response to opioid treatment, or any other diagnoses because its diagnostic value has not been established. In this case, the injured worker's working diagnoses are cervical this protrusion; cervical sprain/strain; lumbar disc protrusion; and lumbar sprain/strain. Subjectively, the injured worker complained of aching in the neck, burning in the low back, aching in the right knee, and aching heaviness and weakness in the left knee. Objectively, the cervical paraspinal muscles were tender with normal range of motion. The lumbar paraspinal muscles were tendered a palpation. Range of motion in the knees were normal. The documentation did not contain a clinical indication or rationale for the Voltage Actuated Sensory Nerve Conduction Threshold Testing. Additionally, Voltage Actuated Sensory Nerve Conduction Threshold Testing is considered experimental and investigational for the evaluation of musculoskeletal pain, the management of individuals with neuropathy, the prediction of the response to opiate treatment or any other diagnosis because it's diagnostic value has not been established. Consequently, Voltage Actuated Sensory Nerve Conduction Threshold Testing is not medically necessary.