

<b>Case Number:</b>	CM15-0005670		
<b>Date Assigned:</b>	01/26/2015	<b>Date of Injury:</b>	12/30/2013
<b>Decision Date:</b>	04/02/2015	<b>UR Denial Date:</b>	12/29/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/12/2015

### 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: Chiropractor, Oriental 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:

The injured worker is a 53 year old female, who sustained an industrial injury on 12/30/13. She has reported neck injury. The diagnoses have included cervical /CADS injury, thoracic sprain/strain and lumbar sprain/strain. Treatment to date has included injections, home exercise program and pain management. Currently, the injured worker complains of increased pain, numbness, tingling along with neck and headaches following 2 injections. Physical exam dated 1/15/15 noted pain and sensory loss upper C 5-7 bilaterally with loss of motion of bilateral wrists. Chiropractic care was sought on 4/30/14 for management of reported headaches, neck pain with stiffness and upper/lower back pain with numbness/tingling into the wrist associated with bilateral shoulder pain. On 12/29/14 Utilization Review submitted a modified certification for Chiropractic treatment 3 times a week for 4 weeks for neck, upper back, lower back, bilateral wrist and bilateral shoulders, modified to 6 sessions on a trial basis, noting the guidelines support an initial trial of 6 visits and documentation does not support previous Chiropractic treatment. The CAMTUS, ACOEM Guidelines, was cited. On 1/8/15, the injured worker submitted an application for IMR for review of Chiropractic treatment 3 times a week for 4 weeks for neck, upper back, lower back, bilateral wrist and bilateral shoulders, modified to 6 sessions on a trial basis.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Chiropractic therapy 3 x 4 for the neck, upper back, low back, bilateral wrists, bilateral shoulders:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Manual therapy and manipulation.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines : 2009; 9294.2; manual therapy and manipulation Page(s): 58/59.

**Decision rationale:** The reviewed medical records of applied care prior to the patients presentation on 4/30/14 for Chiropractic care did not reveal any prior Chiropractic manipulation applied to manage reported residuals of headache, spine or extremity injuries arising from reported cumulative trauma. The CAMTUS Chronic Treatment Guidelines support an initial trial of manipulation, 6 sessions followed by documentation of functional improvement prior to consideration of additional care if requested. The UR determination of 12/29/14 was an appropriate determination to modify the request of 12 sessions to 6 sessions of Chiropractic based on referenced CAMTUS Chronic Treatment Guidelines. Reviewed medical records did not support the medical necessity for 12 sessions of Chiropractic care or the clinical basis to exceed CAMTUS Chronic Treatment Guidelines that support 6 sessions as an initial trial of care.