

<b>Case Number:</b>	CM15-0133006		
<b>Date Assigned:</b>	07/21/2015	<b>Date of Injury:</b>	02/11/2010
<b>Decision Date:</b>	08/18/2015	<b>UR Denial Date:</b>	06/24/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/09/2015

### 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, 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:

The injured worker is a 48-year-old male who sustained an industrial injury on February 11, 2010. He has reported right upper quadrant pain and has been diagnosed with gastroesophageal reflux disease, fatty liver, right upper quadrant pain, and chronic low back pain. Treatment has consisted of medications and medical imaging. The abdomen was soft with right upper quadrant tenderness. There were no masses and bowel sounds were normal. The treatment request included 24-ph acid monitor.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**24 pH acid monitor:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation [www.ncbi.nlm.nih.gov/pubmed/2022156](http://www.ncbi.nlm.nih.gov/pubmed/2022156).

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.nlm.nih.gov/medlineplus/ency/article/003401.htm>.

**Decision rationale:** Pursuant to Medline plus, 24 hour pH acid monitor is not medically necessary. Esophageal pH monitoring is a test that measures how often stomach acid enters the tube that leads from the mouth to the stomach (called the esophagus). The test also measures how long the acid stays there. In this case, the injured worker's working diagnosis (for the G.I. related disorder) is gastroesophageal reflux disease. The date of injury is February 11, 2010. The request for authorization is dated June 24, 2015. There are multiple G.I. progress notes in the medical record. The injured worker, an EGD, and a negative H. pylori test (November 15, 2014) that was negative. The worker was started on Prilosec. The injured worker appears to have ongoing esophageal reflux symptoms. There is no clinical rationale and there is no clinical indication for a 24-hour pH acid monitor. Consequently, absent clinical documentation with a clinical indication and rationale for a 24-hour pH monitor, 24-hour pH acid monitor is not medically necessary.