

Case Number:	CM15-0137422		
Date Assigned:	07/27/2015	Date of Injury:	09/22/1987
Decision Date:	08/31/2015	UR Denial Date:	06/19/2015
Priority:	Standard	Application Received:	07/15/2015

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: Texas, California
 Certification(s)/Specialty: Family Practice

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 63 year old male, who sustained an industrial injury on 09-22-1987. On provider visit dated 06-11-2015 the injured worker has reported drainage from incision site on his lower abdominal anterior wall where he had battery pack replaced for his intrathecal morphine pump. On examination of the abdomen shows dry gauze and lower abdomen anterior incision where the battery pack was placed. The diagnoses have included possible infection battery pack replacement site abdominal wall. Treatment to date has included medication, laboratory studies. The injured worker was noted as disabled and retired. The provider requested referral to a wound clinic. The patient has had diagnosis of delayed surgical wound healing. The patient's surgical history includes bilateral shoulder surgeries, multiple back surgery and fusion, intrathecal pump. The patient has had intrathecal pump on 1/7/15. The patient had a wound of 1 cm, without drainage and signs of infection and pain pump is in normal position. The patient has had small area of ulceration at beginning stage on healed surgical wound on abdominal wall. So the wound has been there since a long time since 1/2015 and now it is showing evidence of infection per the notes dated 06-11-2015. The medication list includes Cialis, Colace, Wellbutrin, Lyrica, Gabapentin, Zolpidem, Tizanidine and Omeprazole.

IMR ISSUES, DECISIONS AND RATIONALES

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

Referral to wound clinic: Overturned

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) Chapter 7, IME and consultations.

Decision rationale: The injured worker is a 63 year old male, who sustained an industrial injury on 09-22-1987. On provider visit dated 06-11-2015 the injured worker has reported drainage from incision site on his lower abdominal anterior wall where he had battery pack replaced for his intrathecal morphine pump. On examination of the abdomen shows dry gauze and lower abdomen anterior incision where the battery pack was placed. The diagnoses have included possible infection battery pack replacement site abdominal wall. Treatment to date has included medication, laboratory studies. The injured worker was noted as disabled and retired. The provider requested referral to a wound clinic. The patient has had diagnosis of delayed surgical wound healing. The patient's surgical history includes bilateral shoulder surgeries, multiple back surgery and fusion, intrathecal pump. The patient has had intrathecal pump on 1/7/15. The patient had a wound of 1 cm, without drainage and signs of infection and pain pump is in normal position. The patient has had small area of ulceration at beginning stage on healed surgical wound on abdominal wall. So the wound has been there since a long time since 1/2015 and now it is showing evidence of infection per the notes dated 06-11-2015. The medication list includes Cialis, Colace, Wellbutrin, Lyrica, Gabapentin, Zolpidem, Tizanidine and Omeprazole.