

<b>Case Number:</b>	CM15-0139275		
<b>Date Assigned:</b>	07/29/2015	<b>Date of Injury:</b>	04/14/2013
<b>Decision Date:</b>	08/26/2015	<b>UR Denial Date:</b>	06/17/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/17/2015

### 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, Florida, California  
 Certification(s)/Specialty: Preventive Medicine, Occupational 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 50 year old female patient who sustained an industrial injury on 04/14/2013. The injured worker was employed as a registered nurse. The accident was described as being assaulted at work. Documentation showed the injured worker deemed permanent and stationary on 06/14/2013. A primary treating office visit dated 12/24/2014 reported the patient with subjective complaint of severe headaches. The following diagnoses were applied: posttraumatic stress disorder, and post-concussion syndrome. The plan of care noted continuing with medications Cambia, and Norco as needed. She is to remain temporarily totally disabled. A more recent primary treating follow up visit dated 01/22/2015 reported the patient temporarily totally disabled. The subjective complaint reported migrainous headaches with throbbing photophobia. The plan of care noted discontinuing Cambia due to kidney complaints. She is to continue utilizing Norco 10/325mg, and follow up in two weeks.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Speech Therapist Consultation, Qty 1: Upheld**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM OMPG, 2004, Chapter 7: Independent Medical Examinations and Consultations, page 127.

**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, page 127.

**Decision rationale:** This claimant was assaulted as work over two years ago. Documentation showed the injured worker deemed permanent and stationary on 06/14/2013. As of December 2014, there were severe headaches. The following diagnoses were applied: posttraumatic stress disorder, and post-concussion syndrome. As of January 2015, the claimant was temporarily totally disabled. There were migrainous headaches with throbbing photophobia. There is no mention of speech or neuropsychological issues. ACOEM Guidelines, Chapter 7, Page 127, state that the occupational health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial factors are present, or when the plan or course of care may benefit from additional expertise. A referral may be for consultation to aid in the diagnosis, prognosis, therapeutic management, determination of medical stability, and permanent residual loss and/or the examinee's fitness for return to work. A consultant is usually asked to act in an advisory capacity, but may sometimes take full responsibility for investigation and/or treatment of an examinee or patient. There are no speech issues noted. This request for the consult fails to specify the concerns to be addressed in the independent or expert assessment, including the relevant medical and non-medical issues, diagnosis, causal relationship, prognosis, temporary or permanent impairment, work capability, clinical management, and treatment options. At present, the request is not certified.

#### **Neuropsychologist Consultation, Qty 1: Upheld**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM OMPG, 2004, Chapter 7: Independent Medical Examinations and Consultations, page 127.

**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, page 127.

**Decision rationale:** As shared previously, this claimant was assaulted as work over two years ago. Documentation showed the injured worker deemed permanent and stationary on 06/14/2013. As of December 2014, there were severe headaches. The following diagnoses were applied: posttraumatic stress disorder, and post-concussion syndrome. As of January 2015, the claimant was temporarily totally disabled. There were migrainous headaches with throbbing photophobia. There is no mention of speech or neuropsychological issues. Per the ACOEM, a consultant is usually asked to act in an advisory capacity, but may sometimes take full responsibility for investigation and/or treatment of an examinee or patient. Neuropsychological dysfunction is not clearly noted in this case. This request for the consult fails to specify the concerns to be addressed in the independent or expert assessment, including the relevant medical

and non-medical issues, diagnosis, causal relationship, prognosis, temporary or permanent impairment, work capability, clinical management, and treatment options. At present, the request is not certified