

<b>Case Number:</b>	CM15-0147358		
<b>Date Assigned:</b>	08/10/2015	<b>Date of Injury:</b>	01/29/2014
<b>Decision Date:</b>	09/15/2015	<b>UR Denial Date:</b>	07/28/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/29/2015

### 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:

This is a 61-year-old male patient, who sustained an industrial injury on 1-29-2014. He reported injury to the left shoulder and neck from a fall off a dump truck. Diagnoses include pain in joint-shoulder, grade 3 separations of left shoulder, and chronic rotator cuff tendinitis, left shoulder, cervical strain and lumbar sprain-strain. Per the doctor's note dated 6/10/2015, he had complaints of left shoulder pain and low back pain. The physical examination revealed tenderness over the left AC joint and pain with range of motion of the left shoulder. Per the doctor's note dated 4/28/15, he had complaints of neck tightness and soreness, low back pain and left shoulder pain. The physical examination revealed cervical spine- tenderness, left shoulder- chronic left AC joint dislocation, tenderness. The medications list includes Norco, Tramadol, Tylenol #4, januvia, ibuprofen, metformin, saw palmetto, omeprazole, hydroxyzine, androgel, sildenafil, tizanidine, oxybutynin and glimepiride. He had a history of left shoulder decompression with bicep tendon transfer in 2009, prior to the current industrial injury. He has had EMG/NCS dated 6/3/2015 with normal findings; right shoulder MRI dated 5/20/2015 which revealed mild to moderate supraspinatus tendinosis, tiny partial tear of the distal subscapularis tendon, remote grade 3 AC separation and status post biceps tendinosis; lumbar spine MRI on 4/24/2015. Treatments to date include shoulder immobilizer, medication therapy, and physical therapy. The appeal requested authorization of a referral to a spine specialist, left shoulder and cervical spine, per and order dated 7-22-15.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Referral to a spine specialist for the left shoulder and cervical spine: Upheld**

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

**Decision rationale:** Referral to a spine specialist for the left shoulder and cervical spine Per the cited guidelines, "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." Per the records provided patient had chronic neck pain, low back pain and left shoulder pain. A recent clinical evaluation of the cervical spine with significant objective findings is not specified in the records provided. An abnormal cervical diagnostic study report is not specified in the records provided. The medical necessity of Referral to a spine specialist for the left shoulder and cervical spine is not medically necessary for this patient.