

Case Number:	CM15-0163330		
Date Assigned:	08/31/2015	Date of Injury:	11/08/2012
Decision Date:	10/05/2015	UR Denial Date:	08/11/2015
Priority:	Standard	Application Received:	08/20/2015

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 53 year old male patient, who sustained an industrial injury on 11-8-12. The diagnoses include lumbar radiculopathy, lumbago, and status post lumbar spine fusion. He sustained the injury while pulling a bin of grapes. Per the doctor's note dated 7/13/15, he had complains of low back pain with numbness and tingling in both legs and feet; right elbow pain. Physical examination revealed palpable muscle spasm next to the lumbar spinous processes and diminished sensation in the left lateral calf, decreased strength in bilateral tibialis anterior and extensor hallucis longus, lumbar spine range of motion- flexion 45, extension neutral and lateral flexion 10 degrees bilaterally. The current medications list is not specified in the records provided. He has undergone lumbar surgery with insertion of hardware at L4-5 on 8-29-13; right middle finger surgery in 2002. He has had EMG/NCS dated 2/27/13 which revealed minor irritation in the right tibialis anterior muscle. He has had physical therapy, a lumbar support, and medication for this injury. The treating physician requested authorization for a computed tomography scan of the lumbar spine with contrast.

IMR ISSUES, DECISIONS AND RATIONALES

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

CT scan of the lumbar spine with contrast: Overturned

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303. Decision based on Non-MTUS Citation Official Disability Guidelines, Low Back, CT.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303-304. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Chapter: Low Back (updated 09/22/15) CT (computed tomography) Myelography.

Decision rationale: Per the cited guidelines "If physiologic evidence indicates tissue insult or nerve impairment, the practitioner can discuss with a consultant the selection of an imaging test to define a potential cause (magnetic resonance imaging [MRI] for neural or other soft tissue, computer tomography [CT] for bony structures)" Per the records provided patient has undergone lumbar surgery with insertion of hardware at L4-5 on 8-29-13. Per the doctor's note dated 7/13/15, he had complains of low back pain with numbness and tingling in both legs and feet. Patient has significant objective findings on the physical examination; palpable muscle spasm next to the lumbar spinous processes and diminished sensation in the left lateral calf, decreased strength in bilateral tibialis anterior and extensor hallucis longus and decreased lumbar range of motion. It is appropriate to perform an imaging study of the lumbar spine in this patient to evaluate for red flags like infection, in this patient with hardware. A CT scan is sometimes preferred as an imaging study compared to MRI in patients with hardware in the spine .The request of the CT scan of the lumbar spine with contrast is medically appropriate and necessary for this patient at this juncture.