

Case Number:	CM15-0169472		
Date Assigned:	09/10/2015	Date of Injury:	10/24/2014
Decision Date:	10/15/2015	UR Denial Date:	08/14/2015
Priority:	Standard	Application Received:	08/28/2015

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: Pennsylvania

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 52 year old male, who sustained an industrial injury on October 24, 2014. The injured worker's initial complaints and diagnoses are not included in the provided documentation. The injured worker was diagnosed as having unspecified gastrointestinal bleed, generalized hyperhidrosis, and nausea. Surgeries to date have included a paraesophageal hernia repair in December 2014 and esophageal perforating repair in January 2015. Medical records (May 20, 2015 to June 10, 2015) indicate that the injured worker had been placed on anticoagulants after developing a deep vein thrombosis of the right upper extremity due to a peripherally inserted central catheter line when he was hospitalized for a perforated esophagus. On May 20, 2014, he was vomiting blood and was hospitalized for acute gastrointestinal bleed with coagulopathy for 2 days. Per the treating physician (June 10, 2015 report), the injured worker was returned to remain off work. The physical exam (June 10, 2015) reveals a soft, no-tender abdomen with normal bowel sounds. Treatment has included a transfusion of fresh frozen plasma, lab work, and medications including anticoagulants, proton pump inhibitor and antiemetic. The requested treatments included 6 sessions of work hardening post-hernia repair. On August 14, 2015, the original utilization review non-certified a request for 6 sessions of work hardening post-hernia repair.

IMR ISSUES, DECISIONS AND RATIONALES

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

Work Hardening, Post-Hernia Repair (6-sessions, 3 times a week for 2-weeks): Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain/Work Conditioning/Work Hardening.

Decision rationale: This worker is status post repair of paraesophageal hernia with complications of mediastinitis, weight loss and venous thrombosis. According to the ODG, work hardening is recommended as an option for treatment of chronic pain syndromes, depending on the availability of quality programs. The ODG list several criteria for admission to a Work Hardening Program. The criteria includes screening documentation and a functional capacity evaluation. No screening documentation or a functional capacity evaluation was included in the record available for this reviewer. There also must be evidence of treatment with an adequate trial of active physical rehabilitation with improvement followed by plateau, with evidence of no likely benefit from continuation of this previous treatment. There is no evidence from the record that this worker had a trial of physical therapy prior to initiation of a work conditioning/hardening program. Therefore, the request is not medically necessary.