

<b>Case Number:</b>	CM15-0181126		
<b>Date Assigned:</b>	09/22/2015	<b>Date of Injury:</b>	06/27/1997
<b>Decision Date:</b>	11/03/2015	<b>UR Denial Date:</b>	09/11/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/14/2015

### 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: 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 61 year old female who sustained an industrial injury on 06-27-1997. A review of the medical records indicates that the injured worker is undergoing treatment for cervicogenic presyncope with orthostatic hypotension, chronic pain, chronic mixed headaches, gastritis with gastroparesis and nausea and vomiting, hiatal hernia with gastroesophageal reflux disease, anxiety, depression, insomnia, dyslipidemia, xerostomia from medication, hyperhomocysteinemia, visual disturbance, osteoporosis, Lasix induced dehydration with secondary acute renal episode of failure and metabolic encephalopathy on 05-02-2014 resulting in chronic mild kidney disease, unknown type of left surgery 04-12-2015, right clavicle fracture on 5-8-2015 and hypothyroidism. According to the progress note dated 08-07-2015, the injured worker reported pain from fractured clavicle and numbness on the right side of head and right upper and lower extremity. Pain level was 0 out of 10 on a visual analog scale (VAS). Physical examination performed on 08-07-2015 revealed fatigue, well oriented, well hydrated with vital signs within normal parameters. Electromyography (EMG) and nerve conduction studies (NCS) on 8-12-2015 revealed normal findings. Treatment to date has included EMG and NCS of the upper extremities on 8-12-2015, prescribed medications, Botox injections and periodic follow up visits. The treatment plan included urine drug screen and large service animal to break falls. Request for authorization dated 09-01-2015, included requests for one large service dog. The utilization review dated 09-11-2015, non-certified the request for one large service dog, Quantity: 1.

## IMR ISSUES, DECISIONS AND RATIONALES

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

### **Large Service Dog, Qty 1: Overturned**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Occupational Therapy Int.: Service dogs and people with physical disabilities partnerships: a systematic review, Mar 2012, pg 54-66; Health Care Assoc of New Jersey (HCANJ): Fall management guideline, 2012, pg 34.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation [http://www.ada.gov/service\\_animals\\_2010.htm](http://www.ada.gov/service_animals_2010.htm).

**Decision rationale:** According to [ada.gov](http://ada.gov), service animals are defined as dogs that are individually trained to do work or perform tasks for people with disabilities. Examples of such work or tasks include guiding people who are blind, alerting people who are deaf, pulling a wheelchair, alerting and protecting a person who is having a seizure, reminding a person with mental illness to take prescribed medications, calming a person with Post Traumatic Stress Disorder (PTSD) during an anxiety attack, or performing other duties. Service animals are working animals, not pets. The work or task a dog has been trained to provide must be directly related to the person's disability. Dogs whose sole function is to provide comfort or emotional support do not qualify as service animals under the ADA. In this case, the medical records note that the injured worker currently has a small service dog. A request has been made for a large service dog, as the small service dog is not able to perform tasks necessary for this injured worker such as helping to break falls or call 911 when the caregiver is not available. The request for Large Service Dog, Qty 1 is medically necessary and appropriate.