

Case Number:	CM15-0190015		
Date Assigned:	10/02/2015	Date of Injury:	11/08/2011
Decision Date:	11/09/2015	UR Denial Date:	09/04/2015
Priority:	Standard	Application Received:	09/28/2015

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: New York, Pennsylvania, Washington
 Certification(s)/Specialty: Internal Medicine, Geriatric
 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 53 year old male, who sustained an industrial injury on 11-8-11. The injured worker is being treated for cervical radiculopathy, lumbar radiculopathy, multiple (HNP) herniated nucleus pulposus in cervical and lumbar spine, lumbar facet arthropathy and migraines. (MRI) magnetic resonance imaging of lumbar spine performed on 7-9-13 revealed degenerative disc disease and facet arthropathy with retrolisthesis L3-4, grade I anterolisthesis L4-5 and retrolisthesis L5-S1, canal stenosis L3-4 and L4-5 and neural foraminal stenosis L3-4, L4-5 and L4-5 right mild to moderate neural foraminal stenosis. Treatment to date has included 7 sessions of chiropractic therapy (no pain relief), cervical epidural steroid injection (20-30% pain relief for about a month), Rhizotomy bilateral L5-S1 (with significant reduction in pain), physical therapy to neck and back (no pain relief), Norco 10-325mg) provided benefit and Ibuprofen (discontinued due to decrease in kidney function).8-17-15, the injured worker complains of stabbing neck pain with radiation to bilateral upper extremities to elbows rated 6 out of 10, persistent and severe migraines and reports he is using a right knee hinge brace and single point cane for ambulation; he also reports stabbing pain in right side of mid back radiating to right flank and extending down into low back with intermittent radiation of pain and numbness to his bilateral lower extremities to toes rated 7-8 out of 10. He notes medications reduce his pain and improve his ability to sleep by 2-4 hours without side effects. He is not working. Physical exam performed on 8-17-15 revealed antalgic gait with use of a cane, moderately tender to palpation about the cervical paraspinals, tenderness to palpation of right lumbar paraspinal muscles, tenderness to palpation in facet joints of lumbar spine with spasms noted and decreased cervical and lumbar range of motion. The treatment plan included a request for an updated (MRI) magnetic resonance imaging of lumbar spine. On 9-4-15 request for (MRI) magnetic resonance imaging of lumbar spine was non-certified by utilization review.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI of the lumbar spine: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Low Back Complaints 2004, Section(s): Special Studies.

Decision rationale: MRI can be useful to identify and define low back pathology in disc protrusion and spinal stenosis. However, there are no red flags on physical exam. In the absence of physical exam evidence of red flags, a MRI of the lumbar spine is not medically indicated. The medical necessity of a lumbar MRI is not substantiated in the records.