

Case Number:	CM15-0223942		
Date Assigned:	11/20/2015	Date of Injury:	02/17/2009
Decision Date:	12/30/2015	UR Denial Date:	10/15/2015
Priority:	Standard	Application Received:	11/13/2015

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 38-year-old male patient, who sustained an industrial injury on 2-17-09. The diagnoses have included degeneration of lumbar or lumbosacral intervertebral disc; brachial neuritis or radiculitis not otherwise specified and spine failed back surgery syndrome. Per the doctor's note dated 12/2/15, he had elevated liver enzymes on lab tests on 7/13/15. He had morphine intrathecal pain pump. Per the doctor's first report of occupational injury dated 09-15-2015, he had nausea and insomnia. The patient was noted to have elevated liver function tests and hepatitis. Blood pressure was documented as 108 over 81. The worker was noted to have ongoing severe low back pain with tenderness of the lumbar paravertebral musculature. The patient was prescribed zantac. Per the doctor's note dated 9/28/15, he had complaints of chronic back pain with bilateral lower extremity radiation and migrainous type, posterior headaches. Physical exam revealed lumbar tenderness, pain with flexion and extension and positive straight leg raise test in the seated position in the bilateral lower extremities for radicular pain at 50 degrees. The medications list includes oxycodone/percocet, fioricet, gabapentin, naproxen, pantoprazole, tizanidine, cymbalta, alprazolam, and vitamin D. The patient reported gastroesophageal reflux disease related to medication associated with gastrointestinal upset. He had lab tests on 7/13/15 which revealed high alkaline phosphatase 141. He had lumbar spine magnetic resonance imaging (MRI) on 9-2-11 and 3-4-2009; EMG/NCS lower extremities dated 5/14/2009 with normal findings. Treatment to date has included oral pain medication; aqua therapy, intrathecal pump and spinal cord stimulator. The original utilization review (10-15-15) non-certified the request for abdominal ultrasound.

IMR ISSUES, DECISIONS AND RATIONALES

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

Abdominal Ultrasound: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation www.ncbi.nlm.nih.gov.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Chapter: Chapter: Hernia (updated 06/05/15) Imaging and Other Medical Treatment Guidelines PubMedReview of hepatic imaging and a problem-oriented approach to liver masses. Bennett WF, Bova JG Hepatology. 1990;12(4 Pt 1):761. Abdominal Imaging Section, Ohio State University Medical Center, Columbus 43210.

Decision rationale: Abdominal Ultrasound: Per ODG guidelines, abdominal ultrasound is "Not recommended except in unusual situations." Per the doctor's first report of occupational injury dated 09-15-2015, he had nausea and insomnia. The patient was noted to have elevated liver function tests and hepatitis. He had lab tests on 7/13/15, which revealed high alkaline phosphatase 141. The patient is taking multiple medications including opioids and NSAIDs since a long time. It is medically appropriate to perform an abdominal ultrasound to further evaluate elevated liver function tests and to help with management of her GI symptoms. The request of Abdominal Ultrasound is medically appropriate and necessary for this patient.