

<b>Case Number:</b>	CM15-0038197		
<b>Date Assigned:</b>	03/06/2015	<b>Date of Injury:</b>	03/20/2001
<b>Decision Date:</b>	04/23/2015	<b>UR Denial Date:</b>	02/04/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	02/27/2015

### 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: Arizona, Texas  
 Certification(s)/Specialty: Internal 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 57 year old male, who sustained an industrial injury on March 20, 2001. The diagnoses have included orthopedic diagnosis, psychiatric diagnosis, sleep disorder, cephalgia, tinnitus, hyperlipidemia and ventral hernia. Treatment to date has included umbilical hernia repair with mesh replacement, barium enema and abdominal ultrasound. Currently, the injured worker complains of lumbar spine pain and worsening constipation and bloating. In a progress note dated January 7, 2015, the treating provider reports examination of the abdomen reveals the abdomen soft and normoactive bowel sounds.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**1 Barium Enema as related to Lumbar injury:** Upheld

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

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation UptoDate.com.

**Decision rationale:** According to uptodate.com double contrast barium enema (DCBE) involves coating the lower intestinal mucosa with barium and inserting air through a rectal catheter to distend the colon, with multiple radiographs taken under fluoroscopy. Patients must undergo bowel preparation. Sedation is not ordinarily given. Patients experience some cramping during the procedure but can return to work after the examination. This is used for colon cancer screening and detection of colonic polyps. In this case, the documentation does not support an intention for colon cancer screening. The patient has abdominal pain with an unremarkable exam. He complains of constipation despite using medications to treat this. The plan of care includes imaging of the abdomen, barium enema and surgical referral.