

<b>Case Number:</b>	CM15-0057177		
<b>Date Assigned:</b>	04/02/2015	<b>Date of Injury:</b>	01/14/2014
<b>Decision Date:</b>	05/04/2015	<b>UR Denial Date:</b>	03/13/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/25/2015

### 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, 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 42 year old male who sustained an industrial injury on 01/14/14. Initial complaints and diagnoses are not available. Treatments to date include medications. Diagnostic studies include nerve conduction studies. Current complaints include right lower extremity discomfort and burning. In a progress note dated 02/05/15 the treating provider reports the plan of care as medications including Tramadol, Gabapentin, Omeprazole, Fenoprofen, Terocin Patches, Bupropion, and Clonazepam. The requested treatments are high complexity lab test protocols including Gas chromatology-mass spectrometry, Liquid chromatography-tandem mass spectrometry, and elisa technology for medication treatment compliance.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Retrospective On-Site Confirmatory analysis using high complexity lab test protocols including Gas chromatography-mass spectrometry, Liquid chromatography-tandem mass spectrometry, and elisa technology for medication treatment compliance:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Non Steroidal Anti Inflammatory Drugs; Specific Antiepilepsy Drugs Page(s): 67-68; 71; 18 and 19.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Anal Bioanal Chem. 2012 May; 403(5):1203-20. doi: 10.1007/s00216-012-5726-z, Current use of high-resolution mass spectrometry in drug screening relevant to clinical and forensic toxicology and doping control, Ojanper I, Kolmonen M, Pelander A.

**Decision rationale:** According to the referenced journal, in the last ten years, the focus has shifted from gas chromatography-mass spectrometry to liquid chromatography-mass spectrometry, because of progress in instrument technology and partly because of the polarity and low volatility of many new relevant substances. Although drug testing may be needed in determining compliance when there is doubt about medication use, there is no indication to use multiple forms of testing. Such forms may be used in cases of doping in athletes. In this case, there is no indication of such behavior and the request for multiple forms and complex analysis for drug compliance is not medically necessary.