

Case Number:	CM15-0080143		
Date Assigned:	05/01/2015	Date of Injury:	02/03/2015
Decision Date:	07/21/2015	UR Denial Date:	03/30/2015
Priority:	Standard	Application Received:	04/27/2015

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: North Carolina

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 41 year old male, who sustained an industrial injury on 02/03/2015. He has reported subsequent bilateral wrist, knee and ankle pain, breathing difficulties, eye irritation and nose bleeds and was diagnosed with bilateral wrist sprain, tendinitis and de Quervain's tenosynovitis, bilateral knee sprain/strain and bilateral ankle Achilles tendinitis. Treatment to date has included medication. In a doctor's first report of occupational injury or illness dated 02/23/2015, the injured worker complained of bilateral knee, wrist, hand, ankle and foot pain, breathing difficulties with episodes of bleeding from the nose, throat irritation and irritated and dry eyes. There were no objective examination findings of the ear, nose and throat documented. The physician noted that a consultation with an ear nose and throat specialist was being recommended to address the injured worker's history of exposure to toxic chemicals with respiratory difficulties and eye irritation. A request for authorization of referral to ear, nose and throat specialist was submitted.

IMR ISSUES, DECISIONS AND RATIONALES

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

Referral to ear, nose and throat (ENT) specialist: Overturned

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 2 General Approach to Initial Assessment and Documentation, Chapter 3 Initial Approaches to Treatment.

Decision rationale: Per the ACOEM: The health practitioner may refer to other specialist if a diagnosis is uncertain or extremely complex, when psychosocial factors are present, or when the plan or course of care may benefit from additional expertise. A referral may be for: 1. Consultation to aid in the diagnosis, prognosis, therapeutic management, determination of medical stability. The patient has multiple HEENT complaints. Since this is outside the scope of the primary treating physician's practice, referral to ENT is medically warranted and the request is medically necessary.