

<b>Case Number:</b>	CM15-0081922		
<b>Date Assigned:</b>	05/04/2015	<b>Date of Injury:</b>	03/30/2011
<b>Decision Date:</b>	06/02/2015	<b>UR Denial Date:</b>	04/27/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	04/29/2015

### 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

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:

This 48-year-old woman sustained an industrial injury on 3/30/2011. The mechanism of injury is not detailed. Evaluations include nerve conduction studies of the right upper extremity. Diagnoses include carpal tunnel syndrome and forearm pain. Treatment has included oral medications and thumb spica splint. Physician notes dated 4/15/2015 show complaints of right forearm pain. Recommendations include continue thyroid medication, fitted for new spica thumb splint, screening test for fibromyalgia, and follow up in six weeks.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Screening fibromyalgia testing through Epigenetics:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 42.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Medscape Internal Medicine 2014: Fibromyalgia Official Disability Guidelines: Pain Chapter.

**Decision rationale:** Fibromyalgia is a diagnosis of exclusion and patients must be thoroughly evaluated for the presence of other disorders that could be the cause of symptoms before a diagnosis of fibromyalgia is made. Although patients with fibromyalgia do not have characteristic or consistent abnormalities on laboratory testing, routine laboratory and imaging studies can help to rule out diseases with similar manifestations and to assist in diagnosis of certain inflammatory diseases that frequently coexist with fibromyalgia. Such tests include the following: Complete blood count with differentia , Metabolic panel, Urinalysis, Thyroid-stimulating hormone level ,25-hydroxy vitamin D level, Vitamin B12 level, Iron studies, including iron level, total iron binding capacity, percent saturation, and serum ferritin level, Magnesium level, and an Erythrocyte sedimentation rate. The use of genetic (Cytokine DNA) testing is not a standard practice in pain management. There is no support for the laboratory study in ODG. The patient has an established diagnosis of chronic pain. Per the referenced guidelines there is no current evidence to support the use of cytokine DNA testing for the diagnosis of pain, including chronic pain. Medical necessity for the requested items has not been established. The requested items are not medically necessary.