

<b>Case Number:</b>	CM14-0008072		
<b>Date Assigned:</b>	02/12/2014	<b>Date of Injury:</b>	11/05/2013
<b>Decision Date:</b>	06/24/2014	<b>UR Denial Date:</b>	01/19/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/22/2014

### 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. The expert reviewer is Board Certified in Psychiatry and Neurology, has a subspecialty in Geriatric Psychiatry and is licensed to practice in California and Texas. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

### 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 48 year old female whose date of injury is 11/05/2013. Her diagnosis is adjustment disorder due to chronic pain with depressed mood. There is a report dated 11/5/13 by [REDACTED]. She worked as an instructional aid and had a student whom she felt was difficult with emotional problems. It is important to note that her job entails working with special needs students with learning disabilities and emotional problems, and the patient was aware of this as being part of her job. She attested to feeling stressed out, unable to concentrate and related, having difficulty with her home life, complained of insomnia and mental pressure, and felt nervous. The patient described feeling threatened by the 9 year old boy, who she had recently given a demerit to. She was taken off of work for 3 weeks for stress. The patient reported to [REDACTED] that she was unable to work due to her inability to think and function both physically and cognitively due to pain, and she wanted pain medication to "take all of her pain away so that she is asymptomatic". She specifically asked [REDACTED] for a guarantee of being pain free; otherwise she will need to be on temporary total disability until she "feels better. When he asked her how much time she felt she would need to be off of work, the patient told him 3 weeks, then informed him that if she required more she would tell him and also tell him when she felt capable of returning to work, and would only return to work when she felt ready. It was at that time that she revealed that she had seen a psychologist and felt she needed to be medicated. She was not on any medications at the time of that report. It was [REDACTED] opinion that this was situational anxiety, nonindustrial in nature, and did not satisfy criteria under the definition of stress under workers' compensation.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**PSYCHOSOCIAL PAIN MEDICATION CONSULTATION: Upheld**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: ACOEM, , 116,127

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: AMERICAN COLLEGE OF OCCUPATIONAL AND ENVIRONMENTAL MEDICINE (ACOEM) 2ND EDITION (2004), PRACTICE GUIDELINES, 127

**Decision rationale:** Per ACOEM practice guidelines, the practitioner may refer to other specialists 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. An independent medical assessment also may be useful in avoiding potential conflict(s) of interest when analyzing causation or when prognosis, degree of impairment, or work capacity requires clarification. The records provided for review show no description of treatments to date, either psychologically or physically, despite the patient informing [REDACTED] that she had seen a psychologist. There is no report from that psychologist illustrating the nature of the patient's stress related complaints. There are no records of the patient having seen any other specialist, medical or otherwise. There was no elucidation as to the nature of the injury, the body parts which may have been injured, or what specifically was causing the patient pain that would require the pain medication that she was requesting from [REDACTED]. She was not on any medication according to the records provided for review. The patient vaguely described to [REDACTED] [REDACTED] being "unable to function physically". It is unclear what the nature of the pain medication consultation would be without the above information. There was absolutely no rationale provided to justify the medical necessity of referring this patient for a consultation as her stated complaints were of such a vague nature. As such, this request is not medically necessary.