MAXIMUS Federal Services

Case Number:	CM14-0119215		
Date Assigned:	09/22/2014	Date of Injury:	12/18/2010
Decision Date:	10/21/2014	UR Denial Date:	07/23/2014
Priority:	Standard	Application Received:	07/29/2014

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 Physical Medicine and Rehabilitation, has a subspecialty in Pain Management and is licensed to practice in California. 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:

This is a female patient with the date of injury of December 18, 2010. A Utilization Review was performed on July 23, 2014 and recommended non-certification of 1 electromyography and nerve conduction velocity studies of the bilateral upper extremities between 7/21/2014 and 9/4/2014 due to the need to clarify as to whether NCV is requested and no rationale to support inclusion of the left arm. An Orthopedic Consultation dated July 1, 2014 identifies Subjective Complaints of pain on the posterior aspect of the shoulder that radiates over to the anterior superior chest wall and descends down the arm. She also describes numbness descending down the arm and into her hand in all digits. Physical Examination identifies range of motion of the head causes pain both on the left hand and the right side of the neck and causes pain in the right shoulder and down the right arm, but in a nonanatomic distribution. 4/5 strength when testing biceps, triceps, wrist extensors, wrist flexors, grip, and finger abductors on the right, and she describes mildly decreased sensation to light touch at C5-T2 dermatomes on the right as well. Assessment identifies right shoulder pain and right arm pain and episodic numbness. Discussion identifies get an EMG to further evaluate the numbness and pain she is describing.

IMR ISSUES, DECISIONS AND RATIONALES

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

Electromyography of the left upper extremities: Overturned

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 177-179.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 178 and 182. Decision based on Non-MTUS Citation ODG Neck Chapter, Electrodiagnostic Studies, Electromyography, Nerve Conduction Studies

Decision rationale: Regarding the request for electromyography of the left upper extremity, Occupational Medicine Practice Guidelines state that the electromyography and nerve conduction velocities including H-reflex tests, may help identify subtle focal neurologic dysfunction in patients with neck or arm symptoms, or both, lasting more than three or four weeks. Within the documentation available for review, there are subjective and physical examination findings identifying subtle focal neurologic deficits. As such, the currently requested electromyography of the left upper extremity is medically necessary.

Electromyography of the right upper extremities: Overturned

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 177-179.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 178 and 182. Decision based on Non-MTUS Citation ODG Neck Chapter, Electrodiagnostic Studies, Electromyography, Nerve Conduction Studies

Decision rationale: Regarding the request for electromyography of the right upper extremity, Occupational Medicine Practice Guidelines state that the electromyography and nerve conduction velocities including H-reflex tests, may help identify subtle focal neurologic dysfunction in patients with neck or arm symptoms, or both, lasting more than three or four weeks. Within the documentation available for review, there are subjective and physical examination findings identifying subtle focal neurologic deficits. As such, the currently requested electromyography of the right upper extremity is medically necessary.

Nerve conduction velocity studies of the left upper extremity: Overturned

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 177-179.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 178 and 182. Decision based on Non-MTUS Citation ODG Neck Chapter, Electrodiagnostic Studies, Electromyography, Nerve Conduction Studies

Decision rationale: Regarding the request for nerve conduction velocity studies of the left upper extremity, Occupational Medicine Practice Guidelines state that the electromyography and nerve conduction velocities including H-reflex tests, may help identify subtle focal neurologic dysfunction in patients with neck or arm symptoms, or both, lasting more than three or four weeks. Within the documentation available for review, there are subjective and physical examination findings identifying subtle focal neurologic deficits. As such, the currently requested nerve conduction velocity studies of the left upper extremity is medically necessary.

Nerve conduction velocity studies of the right upper extremity: Overturned

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 177-179.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 178 and 182. Decision based on Non-MTUS Citation ODG Neck Chapter, Electrodiagnostic Studies, Electromyography, Nerve Conduction Studies

Decision rationale: Regarding the request for nerve conduction velocity studies of the right upper extremity, Occupational Medicine Practice Guidelines state that the electromyography and nerve conduction velocities including H-reflex tests, may help identify subtle focal neurologic dysfunction in patients with neck or arm symptoms, or both, lasting more than three or four weeks. Within the documentation available for review, there are subjective and physical examination findings identifying subtle focal neurologic deficits. As such, the currently requested nerve conduction velocity study of the right upper extremity is medically necessary.