

Case Number:	CM14-0134900		
Date Assigned:	08/27/2014	Date of Injury:	08/17/2011
Decision Date:	09/24/2014	UR Denial Date:	07/21/2014
Priority:	Standard	Application Received:	08/21/2014

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 Occupational Medicine 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:

The application for independent medical review was signed on August 20, 2014. It was for Seroquel. Per the records provided, the claimant was prescribed because the patient had night terrors, depression and posttraumatic stress difficulty in this helps her with difficulty sleeping. The patient is a 32-year-old who sustained an industrial injury on August 17, 2011. The claimant fractured the right calcaneus, and had a fracture of the medial condyle and fractured the right distal femur. The claimant is post open reduction internal fixation of the right femur. She developed a pulmonary embolism postoperatively and was in inpatient rehabilitation for 38 days. She had right lower extremity deep venous thrombosis, major depressive disorder, posttraumatic stress disease and gastroesophageal reflux. There was an orthopedic AME from January 21, 2014. She was working modified duty and was on medicines. She had a crush injury of the right lower extremity with a fractured right calcaneus, fracture of the medial condyle, right distal femur, left ankle sprain, right shoulder contusion, and the lumbar spine strain. It was complicated by the bilateral pulmonary emboli post open reduction internal fixation of the medial condyle of the right distal femur. A psychiatric AME noted on March 3, 2014 that the shortness of breath and increased heart rate were due to post-traumatic stress disorder. The previous provider noted that this medicine should not be used as a first-line treatment. It appears it's being prescribed for a sleep disorder. This will be an off label usage. The psychiatric AME did not recommend the use of atypical antipsychotics in the treatment of this patient.

IMR ISSUES, DECISIONS AND RATIONALES

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

Seroquel 50 Mg #30: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines Mental Illness & Stress Chapter Quetiapine (Seroquel).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) under Mental section, Seroquel.

Decision rationale: The Expert Reviewer based his/her decision on the Non-MTUS Official Disability Guidelines (ODG) Mental section, Seroquel. The Expert Reviewer's decision rationale: The ODG notes that the medicine is not recommended as a first-line treatment. There is insufficient evidence to recommend atypical antipsychotics (quetiapine, risperidone) for conditions covered in ODG. It is not clear that first line medicines had been exhausted. Also, the doctor appears to be prescribing it for dysfunctional sleep and night terrors, and I did not find evidence for support of this use of the medicine. The request is appropriately considered not medically necessary.