

Case Number:	CM14-0139286		
Date Assigned:	09/05/2014	Date of Injury:	01/17/2013
Decision Date:	10/23/2014	UR Denial Date:	08/20/2014
Priority:	Standard	Application Received:	08/28/2014

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 Internal Medicine and is licensed to practice in New York. 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 patient is a 38 year old male stocker with a date of injury of 01/17/2013. He had low back pain radiating to his left leg picking up a 30 pound box. The diagnosis was degenerative disc disease. On 10/03/2013 he had a L3-L4, L4-L5 left hemilaminectomy/discectomy/decompression. On 01/22/2014 he had low back pain. He was compliant with a home exercise program. On 02/05/2014 he had physical therapy visit 17. On 02/19/2014 he completed physical therapy visit 21. On 03/03/2014 he had low back pain when sitting for more than 30 minutes and when getting up. On 03/14/2014 he completed 30 visits of physical therapy. On 03/28/2014 a lumbar MRI revealed expected post operative changes. On 04/18/2014 he was cleared to return to work with limited lifting of 5 pounds maximum with no repetitive lifting/bending. The CBC, sed rate and CRP were all normal. On 05/13/2014 he was to stop opiates and was MMI. On 06/11/2014 he was taking Norco, Prevacid, Naproxen, Fleet enema and Gabapentin. He was using Tucks/Annusol rectal suppositories. He had constipation, went to the ER where he was told that he had hemorrhoids and was given Duocolax. He never smoked cigarettes. He was 5'9" tall and weighed 203 pounds. Lower extremity muscle strength was 5/5. Straight leg raising was positive bilaterally. There was no abdominal exam or rectal exam.

IMR ISSUES, DECISIONS AND RATIONALES

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

Outpatient esophogogastroduodenoscopy (EGD)/colonoscopy: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Duration Guidelines

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Harrison's Principles of Internal Medicine, 18th Edition. 2011.

Decision rationale: MTUS and ODG do not cover this clinical situation. The patient is a 38 year old male, was examined and has hemorrhoids. He has constipation from opiates. There were no symptoms of obstruction, emesis, nausea, abdominal mass or GI bleeding. He had a normal CBC, sed rate and CRP. He takes NSAIDS and a proton pump inhibitor. There is no family history of colon cancer and he is too young for a routine screening colonoscopy. There is insufficient documentation to substantiate the medical necessity for an EGD and colonoscopy.

Labs: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Duration Guidelines

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Harrison's Principles of Internal Medicine, 18th Edition. 2011.

Decision rationale: MTUS and ODG do not cover this clinical situation. The patient is a 38 year old male, was examined and has hemorrhoids. He has constipation from opiates. There were no symptoms of obstruction, emesis, nausea, abdominal mass or GI bleeding. He had a normal CBC, sed rate and CRP. He takes NSAIDS and a proton pump inhibitor. There was a request for a CBC, sed rate and SMA 20. The previous CBC and sed rate were normal. There is no documentation of liver disease, renal disease or an electrolytes disorder. He was previously evaluated in the ER and there was no documentation of any lab abnormality. There is insufficient documentation to substantiate the medical necessity of lab tests.

Follow-up office visits: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Duration Guidelines

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Harrison's Principles of Internal Medicine, 18th Edition. 2011.

Decision rationale: MTUS and ODG do not cover this clinical situation. The patient is a 38 year old male, was examined and has hemorrhoids. He has constipation from opiates. There were no symptoms of abdominal pain, obstruction, emesis, nausea, abdominal mass or GI bleeding. He had a normal CBC, sed rate and CRP. He takes NSAIDS and a proton pump

inhibitor. There is no objective documentation to substantiate the medical necessity for follow up consultant (GI) visits.