

Case Number:	CM14-0142911		
Date Assigned:	09/10/2014	Date of Injury:	03/15/2007
Decision Date:	10/09/2014	UR Denial Date:	08/21/2014
Priority:	Standard	Application Received:	09/03/2014

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:

This is a 53 year-old male who has reported an umbilical hernia after an injury on 3/15/07. He is status post umbilical hernia repair using mesh several years ago, possibly in 2012 but the available records do not contain a surgical report. He has reported abdominal pain before and after the repair. On 1/14/14 the treating surgeon noted ongoing pain and tenderness in the umbilical region. He diagnosed "inflammation secondary to mesh" and recommended a series of steroid injections. He injected the painful umbilical area with local anesthetic and steroid, noting immediate pain relief. No further reports from this surgeon were in the records available for this review. The primary treating physician report of 2/13/14 was partially illegible and had no clear statements regarding the results of the abdominal injection. A second injection was recommended. On 8/21/14, Utilization Review non-certified the requested "umbilicus hernia anti-inflammatory injection with general surgeon", noting the lack of indications for this treatment, the lack of reports of the results from prior injections, and the lack of medical evidence for this treatment.

IMR ISSUES, DECISIONS AND RATIONALES

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

Umbilicus hernia anti-inflammatory injection with general surgeon: Upheld

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Hernia Chapter and Medscape Reference, Umbilical Hernia Repair, Complications UpToDate, Umbilical Hernia Overview; Reconstructive materials used in surgery: Classification and host response

Decision rationale: This injured worker has non-specific abdominal pain and tenderness, attributed to inflammation around the mesh but with no objective evidence of such inflammation. There are no guidelines which recommend steroid injections of the umbilical region after hernia repair (with or without mesh), and a search for medical evidence in other medical literature was fruitless. The treating physician has not provided any medical evidence in support of this empirical treatment. Regardless, localized pain in various body parts can at times be relieved by local steroid injections. In this case, the injured worker had an injection in January 2014, with no documentation of any response beyond the first few minutes. Assuming any "inflammation" and medical necessity to repeat this empirical treatment, there should be specific evidence of pain relief and increased function as a result of the first injection. No such evidence was presented. A repeat injection is therefore not medically necessary.