

Case Number:	CM14-0160744		
Date Assigned:	10/06/2014	Date of Injury:	06/11/2014
Decision Date:	11/06/2014	UR Denial Date:	09/05/2014
Priority:	Standard	Application Received:	09/30/2014

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 Ophthalmology 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 patient is a 51 year-old male with a date of injury on 6/11/2014, when reportedly the worker was hit in the face by a water jug, which caused him to fall to the ground landing on his right side, wrist and hand. Request is for Ophthalmology consultation. Provider evaluation on 6/17/2014, the patient complains of blurry vision; the onset, duration, and location (right vs. left vs. both) is not specified in the history. Visual acuity is 20/200 bilaterally, and left eye is count fingers from 7 feet - it is not specified if this is with spectacles. The patient was evaluated by an Ophthalmologist on 6/19/2014. The patient has a past ocular history of undergoing cataract surgery and retinal detachment surgery in the right eye. Visual acuity is 20/200 without correction in the right eye (OD), with pinhole improvement to 20/40-2. The left eye (OS) is 20/200 with pinhole to 20/70. Exam is significant for a posterior chamber intraocular lens of the right eye, and a 2+ nuclear sclerotic cataract OS. Dilated fundus exam is significant for scarring and atrophy OD, and retinal pigment epithelial mottling OS. The right eye also has cryopexy scars. Assessment is old retinal detachment of the right eye, non-exudative macular degeneration, and cataract OS. The cataract is determined to be "age-related" and un-related to the injury. There are no signs of ocular damage on this examination.

IMR ISSUES, DECISIONS AND RATIONALES

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

Ophthalmologist consultation: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Chapter 7: Independent Medical Examinations and Consultations. Page 127

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) Chapter 7, page(s) 127

Decision rationale: The patient has already undergone Ophthalmology evaluation on 6/19/2014, and was diagnosed with old retinal detachment of the right eye, and cataract of the left eye that is age-related. There was no evidence of ocular damage from the work-related injury. Since this encounter, there is no evidence that the patient is experiencing a new visual disturbance, and therefore medical necessity for repeat Ophthalmology evaluation is not established.