

Case Number:	CM14-0168512		
Date Assigned:	10/16/2014	Date of Injury:	01/14/2013
Decision Date:	12/18/2014	UR Denial Date:	09/27/2014
Priority:	Standard	Application Received:	10/13/2014

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, has a subspecialty in Nephrology 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 42-year-old female with a 1/14/2013 date of injury. She fell down a couple steps while carrying a box and fell onto her buttocks. A progress report dated 9/17/14 noted subjective complaints of back pain and bilateral buttock and leg pain. There were no objective findings documented. Diagnostic Impression: Lumbar disc displacement without myelopathy. Treatment to Date: physical therapy and lumbar ESI. A UR decision dated 9/27/14 denied the request for blood patch for lumbar spine. The medical reports available to this reviewer have not established medical necessity for a lumbar level epidural blood patch. None of the medical records suggest a need for a blood patch.

IMR ISSUES, DECISIONS AND RATIONALES

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

Blood Patch for Lumbar Spine Qty: 1: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation NIH.gov/CSF leak

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: <http://www.nlm.nih.gov/medlineplus/ency/article/001068.htm>

Decision rationale: CA MTUS and ODG do not address this issue. If a headache lasts longer than a week after a lumbar puncture, a procedure may be done to block the hole that may be leaking fluid. This is called a blood patch, because a blood clot can be used to seal the leak. However, in the documents available for review, there is no mention of recent lumbar puncture or any other procedure or condition that may have resulted in a CSF leak. It is unclear what the benefit a blood patch would be for the patient. Therefore, the request for blood patch for lumbar spine Qty: 1 is not medically necessary per the cited guidelines.