

Case Number:	CM14-0085671		
Date Assigned:	07/23/2014	Date of Injury:	07/27/2007
Decision Date:	09/19/2014	UR Denial Date:	05/16/2014
Priority:	Standard	Application Received:	06/09/2014

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 Physical Medicine & Rehabilitation 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 injured worker is a 52-year-old male with a reported date of injury on 07/27/2007. The mechanism of injury was due to a burn. His previous treatments were noted to be medications. The progress note dated 05/06/2014 revealed the injured worker felt the same as his last visit, and that there was still a constant buzzing in his left ear. The injured worker indicated his ear had not bled as much as before. However, he had still experienced white discharge. The injured worker was having a hard time hearing out of the left ear and still had dizziness. The physical examination revealed a normal examination. The provider indicated the injured worker was to have a follow-up for an electronystagmography test. The Request for Authorization form was submitted within the medical records. The request was for an ENG (electronystagmography testing) with [REDACTED], audiology for vertigo.

IMR ISSUES, DECISIONS AND RATIONALES

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

ENG(electronystamography testing) with [REDACTED], Audiology: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Benign Positional Vertigo, Author: John C. Li, MD, Chairman, Section of Otolaryngology, Palm Beach Gardens Medical Center.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline: Korres,S., Riga,M.,

Papacharalampous,G., Chimona,T., Danielidis,V.,Korres,G., and Xenelis,J.(2009).Relative diagnostic importance of electronystagmography and magnetic resonance imaging in vestibular disorders. The Journal of Laryngology and Otology, 123, (08), pages 851-856.Medical Evidence.

Decision rationale: The request for an ENG (electronystagmography testing) with [REDACTED], audiology, is non-certified. The injured worker complained of dizziness and hearing loss. "Electronystagmography performed to assess eye movements to determine how well the acoustic nerve and the oculomotor nerve are functioning within the brain. The test can be performed to determine whether a balance or nerve disorder is the cause of dizziness or vertigo. In a study authored by Korres, et al, it was noted, "Electronystagmography remains the most useful examination for a etiological diagnosis of patients with vertigo and unsteadiness, since the actual number of patients with vertigo and unsteadiness of central origin is small (3.9 per cent), even in a population in which history and clinical examination may indicate an increased probability of central nervous system dysfunction." There was a lack of documentation regarding clinical findings to warrant an electronystagmography. There was a lack of documentation regarding previous conservative treatment or testing. Therefore, the request is not medically necessary and appropriate.