

Case Number:	CM14-0137909		
Date Assigned:	09/05/2014	Date of Injury:	01/07/2014
Decision Date:	06/04/2015	UR Denial Date:	08/01/2014
Priority:	Standard	Application Received:	08/26/2014

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: Illinois

Certification(s)/Specialty: Ophthalmology

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 47-year-old female, who sustained an industrial injury on 1/7/2014. The current diagnoses are ocular contusion, ocular chemical burn, conjunctivitis, ocular inflammation, blepharitis, and dry eyes. According to the progress report dated 7/21/2014, the injured worker complains of slight pain and redness in bilateral eyes in the wind or upon wakening. The current eye medications are Genteal gel, Refresh PM eye ointment, and Erythromycin eye ointment. Treatment to date has included ophthalmic gel/ointment. The plan of care includes blepharotomy of the left eye. As noted above, there is evidence of chronic inflammation in both eyes (conjunctivitis and blepharitis). These chronic conditions were likely exacerbated by the chemical injury/exposure.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 blepharotomy of the left eye, as outpatient: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 16 Eye Chapter Page(s): 415-490.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American Academy of Ophthalmology Preferred Practice Pattern (2013).

Decision rationale: This patient has chronic conjunctivitis and blepharitis. The patient has had some standard therapies, which have not completely controlled her symptoms. The procedure that has been proposed is to do a "blapharotomy" which actually refers to the procedure of manually probing / expressing the meibomian glands to relieve the blockage. There are a few items that need to be mentioned here. 1. This patient has not received all the possible treatments for her condition. In particular, based on the records and history of conjunctivitis and keratitis, the most important problem that needs to be address is the inflammation. Other than doxycycline (which has some anti-inflammatory effect in addition to the antibiotic), there is nothing in the records to indicate that the patient has received anti-inflammatory therapy. Therefore, the first step in helping this patient would be to start topical steroids (e.g. Lotemax) along with Restasis. Other medications that can be used for additional anti-inflammatory therapy is oral omega-3 fatty acids. 2. As far as the meibomian gland blockage, the standard treatment is for the patient to warm the lids followed by lid massage. Again, there if nothing in the records to indicate that the patient has been instructed to do this or has been doing this on a daily basis.3. Finally, as far as the procedure that has been proposed. It is a newer procedure that may benefit some patients, however it has never been studied in a randomized trial. Therefore, at this time it is considered "experimental" and is not covered by any insurance companies. Therefore, the request is not medically necessary.