

Case Number:	CM15-0112146		
Date Assigned:	06/18/2015	Date of Injury:	02/18/1997
Decision Date:	07/17/2015	UR Denial Date:	06/05/2015
Priority:	Standard	Application Received:	06/10/2015

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: New Jersey, Alabama, California
 Certification(s)/Specialty: Neurology, Neuromuscular Medicine

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 61-year-old female who sustained an industrial injury on February 18, 1997. She has complained of migraine headaches and has been diagnosed with internal organ injury, gastric ulcer/stress, migraine headaches, and TMJ dysfunction. Treatment has included medications and Botox injections. There were taut bands at bilateral temporalis and crepitus at bilateral TMJ's. There were multiple active trigger points b/l cervical paraspinals and trapezius. The treatment request included a MR angiography of the brain related to intractable severe migraine headaches.

IMR ISSUES, DECISIONS AND RATIONALES

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

Brain MR (magnetic resonance) Angiography, related to intractable severe migraine headaches: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines: Head - MRA (magnetic resonance angiography).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation MRI (magnetic resonance imaging). <http://www.odg-twc.com/index.html>.

Decision rationale: According to ODG guidelines, brain MRI "Recommended as indicated below. Magnetic Resonance Imaging (MRI) is a well-established brain imaging study in which the individual is positioned in a magnetic field and a radio-frequency pulse is applied. Hydrogen proton energy emission is translated into visualized structures. Normal tissues give off one signal, while abnormal structures give off a different signal. Due to its high contrast resolution, MRI scans are superior to CT scans for the detection of some intracranial pathology, except for bone injuries such as fractures. MRI may reveal an increased amount of pathology as compared with CT. Specific MRI sequences and techniques are very sensitive for detecting traumatic cerebral injury; they may include, but are not limited to, diffusion-tensor, gradient echo, and Fluid Attenuated Inversion Recovery (FLAIR). Some of these techniques are not available on an emergency basis. MRI scans are useful to assess transient or permanent changes, to determine the etiology of subsequent clinical problems, and to plan treatment. MRI is more sensitive than CT for detecting traumatic cerebral injury. (Colorado, 2005) (Intracorp, 2005) (Takanashi, 2001) Neuroimaging is not recommended in patients who sustained a concussion/mild TBI beyond the emergency phase (72 hours post-injury) except if the condition deteriorates or red flags are noted. (Cifu, 2009) See also Diffusion tensor imaging (DTI). Indications for magnetic resonance imaging: To determine neurological deficits not explained by CT; To evaluate prolonged interval of disturbed consciousness; To define evidence of acute changes super-imposed on previous trauma or disease." There are no focal signs or change in mental status supporting head MRI. Therefore, the request for Brain MR (magnetic resonance) Angiography, related to intractable severe migraine headaches is not medically necessary.