

<b>Case Number:</b>	CM15-0122292		
<b>Date Assigned:</b>	07/06/2015	<b>Date of Injury:</b>	04/30/2008
<b>Decision Date:</b>	08/05/2015	<b>UR Denial Date:</b>	06/11/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/24/2015

### 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: Texas, Florida, California  
 Certification(s)/Specialty: Preventive Medicine, Occupational 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 49 year old male, who sustained an industrial injury on 4/30/2008. Diagnoses include lumbosacral/joint/ligament sprain/strain and sciatica. Treatment to date has included TENS unit, home exercise, medications, acupuncture and physical therapy. Per the Primary Treating Physician's Progress Report dated 4/07/2015, the injured worker reported new pain in the left buttock for the past 4 days and continued radiation in the right and left legs down to the calf. He has not used his TENS unit or completed home exercises as much recently because of lack of time. Objective findings include an abnormal gait. The plan of care included continuation of medications, TENS unit, home exercise and acupuncture. Authorization was requested for 2 pairs of TENS patches.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**TENS patches x 2 pair:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Criteria for the use of TENS Page(s): 115-117.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 116 of 127.

**Decision rationale:** This claimant was injured in 2008 with lumbosacral/joint/ligament sprain/strain and sciatica. Treatment to date has included TENS unit, home exercise, medications, acupuncture and physical therapy. As of April 2015, the injured worker reported new pain in the left buttocks for the past 4 days and continued radiation in the right and left legs down to the calf. He has not used his TENS unit or completed home exercises as much recently because of lack of time. The MTUS notes that TENS is not recommended as a primary treatment modality, but a one-month home-based TENS trial may be considered as a noninvasive conservative option, if used as an adjunct to a program of evidence-based functional restoration, for the conditions described below. Neuropathic pain: Some evidence (Chong, 2003), including diabetic neuropathy (Spruce, 2002) and post-herpetic neuralgia. (Niv, 2005) Phantom limb pain and CRPS II: Some evidence to support use. (Finsen, 1988) (Lundeberg, 1985) Spasticity: TENS may be a supplement to medical treatment in the management of spasticity in spinal cord injury. (Aydin, 2005) Multiple sclerosis (MS): While TENS does not appear to be effective in reducing spasticity in MS patients it may be useful in treating MS patients with pain and muscle spasm. (Miller, 2007) I did not find in these records that the claimant had these conditions that warranted TENS. Also, an outright purchase is not supported, but a monitored one month trial, to insure there is objective, functional improvement. In the trial, there must be documentation of how often the unit was used, as well as outcomes in terms of pain relief and function; rental would be preferred over purchase during this trial. There was no evidence of such in these records. In fact, in this case, the patient did not even use his TENS due to a lack of time. As a TENS is not certifiable, the patches would not be necessary.