

<b>Case Number:</b>	CM15-0124757		
<b>Date Assigned:</b>	07/09/2015	<b>Date of Injury:</b>	06/07/2013
<b>Decision Date:</b>	08/11/2015	<b>UR Denial Date:</b>	06/12/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/29/2015

### 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: California

Certification(s)/Specialty: Dentist

### 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 48-year-old male, who sustained an industrial injury on 6/07/2013. The mechanism of injury was not noted. The injured worker was diagnosed as having severe periodontal disease with missing teeth 23-26, existing partial only 23-25. Treatment to date has included diagnostics, knee replacement surgery, physical therapy, and medications. Several documents within the submitted medical records were difficult to decipher. Currently, the injured worker complains of his tooth being knocked out when he was being intubated for knee surgery (tooth #26). Missing teeth included #2, 4, 5, 12, 15, 16, 18, 23, 24, 25, 26, and 32. The treatment plan included full mouth scaling and root planning for new partial lower denture.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Full month scaling and root planning, new partial level denture: 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, Dental trauma treatment; <http://www.ncbi.nlm.nih.gov/pubmed/15016039>.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 2 General Approach to Initial Assessment and Documentation, Chronic Pain Treatment Guidelines CA MTUS/ACOEM Guidelines - General Approach to Initial Assessment and Documentation (9792.20. MTUS July 18, 2009 page 3 and ACOEM Practice Guidelines, 2nd Edition (2004), Chapter 2).

**Decision rationale:** Records reviewed include numerous hand written notes, some illegible. One unsigned note dated 05/18/15 states patient presents with advanced generalized periodontal disease, radiographic advance bone loss heavy generalized build up and inflammation, poor hygiene, patient needs urgent periodontal treatment possible link to diabetes and heart problems. Patient has been advised that prior to adding a tooth to existing denture or fabricating new denture, patient has to address the periodontal infection. Per medical reference mentioned above, "Removal of supra- and subgingival bacterial plaque biofilm and calculus by comprehensive, meticulous periodontal scaling and root planning" are part of the treatment plan for periodontal therapy (J Periodontol 2011). Since this patient has been found with advanced generalized periodontal disease, radiographic advance bone loss, heavy generalized build up and inflammation, this reviewer finds the request for root planning and scaling to be medically necessary. However, there are insufficient legible documentation regarding the new partial denture request. Absent further detailed documentation and clear rationale regarding the partial denture, the medical necessity for this request is not evident. Per medical reference mentioned above "a focused medical history, work history and physical examination generally are sufficient to assess the patient who complains of an apparently job related disorder" in order to evaluate a patient's needs. This reviewer does not believe this has been sufficiently documented in this case. This reviewer recommends non-certification at this time. Not medically necessary.