

Case Number:	CM15-0173522		
Date Assigned:	09/15/2015	Date of Injury:	07/26/2010
Decision Date:	10/21/2015	UR Denial Date:	08/25/2015
Priority:	Standard	Application Received:	09/02/2015

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, California
 Certification(s)/Specialty: Family Practice

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 58 year old female, who sustained an industrial injury on 7-26-10. The documentation noted on 8-18-15 the injured workers both knees has healed incisions above the left knee and nick incisions of the right knee. Range of motion is 0 to 120 and nontender. Lumbar spine has normal contour and tender lower lumbar spine. The patient has had a normal neurological examination. The diagnoses have included sprain of lumbar. Treatment to date has included total knee replacement on the left in 2013 and a debridement of the right knee in 2/11/2015; physical therapy; anti-inflammatory medication. The original utilization review 8-25-15 non-certified the request for one magnetic resonance imaging (MRI) of lumbar spine without contrast. The patient had received an unspecified number of PT visits for this injury. The medication list include Norco, Relafen, Tizanidine and Flexeril. The patient had used a cane for this injury.

IMR ISSUES, DECISIONS AND RATIONALES

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

One MRI of lumbar spine without contrast: Upheld

Claims Administrator guideline: Decision based on MTUS Low Back Complaints 2004.

MAXIMUS guideline: Decision based on MTUS Low Back Complaints 2004, Section(s): Special Studies.

Decision rationale: One MRI of lumbar spine without contrast. Per the ACOEM low back guidelines cited below "Unequivocal objective findings that identify specific nerve compromise on the neurologic examination are sufficient evidence to warrant imaging in patients who do not respond to treatment and who would consider surgery an option. When the neurologic examination is less clear, however, further physiologic evidence of nerve dysfunction should be obtained before ordering an imaging study. Indiscriminant imaging will result in false-positive findings, such as disk bulges, that are not the source of painful symptoms and do not warrant surgery. If physiologic evidence indicates tissue insult or nerve impairment, the practitioner can discuss with a consultant the selection of an imaging test to define a potential cause (magnetic resonance imaging [MRI] for neural or other soft tissue, computed tomography [CT] for bony structures)." Patient did not have any evidence of severe or progressive neurologic deficits that are specified in the records provided. As per the records provided the patient has had a normal neurological examination. Finding indicating red flag pathologies were not specified in the records provided. The history or physical exam findings did not indicate pathology including cancer, infection, or other red flags. Patient has received an unspecified number of PT visits for this injury. The records submitted contain no accompanying current PT evaluation for this patient. A detailed response to complete course of conservative therapy including PT visits was not specified in the records provided. Previous PT visit notes were not specified in the records provided. A plan for an invasive procedure of the lumbar spine was not specified in the records provided. A recent lumbar spine X-ray report is not specified in the records provided. The One MRI of lumbar spine without contrast is not medically necessary for this patient.