

<b>Case Number:</b>	CM15-0179424		
<b>Date Assigned:</b>	09/21/2015	<b>Date of Injury:</b>	07/01/2015
<b>Decision Date:</b>	10/29/2015	<b>UR Denial Date:</b>	08/15/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/11/2015

### 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, New York, 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 applicant is a represented 28-year-old who has filed a claim for low back pain reportedly associated with an industrial injury of July 1, 2015. In a Utilization Review report dated August 15, 2015, the claims administrator failed to approve a request for lumbar MRI imaging. An RFA form received on August 6, 2015 and an associated office visit of July 23, 2015 were referenced in the determination. The applicant and/or applicant's attorney subsequently appealed. On July 27, 2015, the applicant reported having pain sustained contusions of multiple body parts, including the bilateral feet, low back, knee, and hip. Mild low back pain at rest was noted with radiation of the pain to the right hip region. The applicant was reportedly working modified duty, it was suggested. The applicant reportedly exhibited an abnormal gait, unspecified weakness, tingling secondary to pain, the absence of any sensory deficits, and normal reflexes on neurologic exam, the treating provider reported. Multiple areas of tenderness were noted on exam including the hips, knees, ankles, feet, and low back. MRI imaging was sought for the purpose of progressing the applicant's activity. The requesting provider was an occupational medicine physician. Norco and Motrin were renewed.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**MRI of the lumbar spine without contrast:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Low Back Complaints 2004. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back Chapter.

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

**Decision rationale:** No, the request for MRI imaging of lumbar spine without contrast was not medically necessary, medically appropriate, or indicated here. As noted in the MTUS Guidelines in ACOEM Chapter 12, Table 12-4, page 296, no imaging studies are indicated for applicants with lumbar radiculopathy unless compression of severe or progressive. Here, however, the July 23, 2015 progress note made no mention of the applicant's having severe issues with neurologic compression or sciatica. The applicant's presentation, moreover, was not seemingly suggestive of nerve root compromise referable to the lumbar spine. The applicant had multiple foci of pain, including the bilateral hips, bilateral knees, bilateral ankles, bilateral feet, low back, etc. The request, moreover, was initiated on July 23, 2015, i.e., on or around the three-week mark of the date of the injury. The MTUS Guidelines in ACOEM Chapter 12, Table 12-4, page 296 notes that imaging studies are not indicated for four to six-week absent evidence of severe neurologic compression. There was no such evidence here. The MTUS Guideline in ACOEM Chapter 12, page 304 further stipulates that imaging studies should be reserved for cases in which surgery is being considered or red flag diagnoses are being evaluated. Here, the attending provider herself acknowledged on July 23, 2015 that the applicant was not, in fact, considering or contemplating any kind of surgical intervention as of that date. Therefore, the request was not medically necessary.