

Case Number:	CM15-0027576		
Date Assigned:	02/19/2015	Date of Injury:	10/29/2009
Decision Date:	07/07/2015	UR Denial Date:	01/14/2015
Priority:	Standard	Application Received:	02/12/2015

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: Montana

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:

This is a 28 year old female dog groomer with an October 29, 2009 date of injury. The injury occurred when lifting a dog and has resulted in chronic pain since then. A progress note dated January 7, 2015 documents subjective findings (increased constant pain in the entire back, neck, left leg; increased anxiety; depression; can't concentrate; poor sleep; muscle spasms in arms, back, ribs, legs; cramps in both legs and feet; loss of feeling in both hands, arms, and legs), objective findings (tenderness to cervical spine and trapezius; tenderness to lumbar paravertebral muscles; positive straight leg raise; walks with a limp favoring the left; decreased sensation and weakness to left leg), and current diagnoses (lumbar disc displacement; lumbosacral neuritis; sprain of neck). Treatments to date have included medications, electromyogram, magnetic resonance imaging of the lumbar spine, and physical therapy. The treating physician documented a plan of care that included a spine consultation.

IMR ISSUES, DECISIONS AND RATIONALES

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

Spine consultation: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Treatment Index, Pain, Office Visits.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004), Chapter 7, Independent Medical Examinations and Consultations, page 127.

Decision rationale: The American College of Occupational and Environmental Medicine (ACOEM) Practice Guidelines for Independent Medical Examinations and Consultations, recommends referral to another practitioner or specialist when the patient might benefit from additional expertise. The ACOEM guidelines note that the practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial factors are present, or when the plan or course of care may benefit from additional expertise. The consultation service is to aid in the diagnosis, prognosis, therapeutic management, determination of medical stability, and permanent residual loss and/or the examinee's fitness for return to work. A consultant is usually asked to act in an advisory capacity, but may sometimes take full responsibility for investigation and/or treatment of an examinee or patient. In this case the medical records note that the injured worker has significant radicular complaints, including weakness of the left lower extremity, and positive electro diagnostic test findings. The left leg weakness with foot drag appears to reflect a progressive change and a possible red flag condition. The request for spine consultation is medically necessary.