

Case Number:	CM15-0070750		
Date Assigned:	04/20/2015	Date of Injury:	10/08/2010
Decision Date:	05/19/2015	UR Denial Date:	03/13/2015
Priority:	Standard	Application Received:	04/14/2015

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: Maryland

Certification(s)/Specialty: Internal Medicine, Rheumatology

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 49 year old female sustained an industrial injury on 10/8/10. She subsequently reported face, arm and leg pain. Diagnoses include temporomandibular joint disorder. Treatments to date have included x-rays, MRIs, surgery and prescription pain medications. The injured worker currently experiences neck, tooth and jaw pain. A request for an MRI of the cervical spine without contrast was made by the treating physician.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI of the cervical spine without contrast: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 177-178.

Decision rationale: This 49 year old female has complained of neck pain, tooth pain and jaw pain since date of injury 10/8/10. She has been treated with surgery and medications. Criteria for ordering imaging studies in the evaluation of neck complaints include emergence of a red flag,

physiologic evidence of tissue insult or neurologic dysfunction, failure to progress in a strengthening program intended to avoid surgery and clarification of the anatomy prior to an invasive procedure. The available provider notes do not include documentation meeting any of these criteria. On the basis of the available medical records and per the ACOEM guidelines cited above, MRI of the cervical spine is not medically necessary.