

Case Number:	CM15-0073206		
Date Assigned:	04/23/2015	Date of Injury:	03/20/2014
Decision Date:	06/11/2015	UR Denial Date:	04/09/2015
Priority:	Standard	Application Received:	04/17/2015

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: 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 41 year old female who sustained an industrial injury on 3/20/14. The injured worker reported symptoms in the back. The injured worker was diagnosed as having lumbar strain without neurologic deficit or radicular complaint. Treatments to date have included physical therapy, acupuncture treatment and activity modifications. Currently, the injured worker complains of lower back pain. The plan of care was for an electromyography and nerve conduction studies.

IMR ISSUES, DECISIONS AND RATIONALES

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

EMG for bilateral lower extremities: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG)-TWC Low Back Procedure Summary Online Version last updated 03/24/2015.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Chapter: Low Back Complaints Section: Electrodiagnostic Studies.

Decision rationale: The Official Disability Guidelines comment on the use of electrodiagnostic studies to include EMGs. EMGs (Electromyography) which are recommended as an option for low back. Electrodiagnostic studies should be performed by appropriately trained Physical Medicine and Rehabilitation or Neurology physicians. The Minimum Standards for electrodiagnostic studies include: (1) EDX testing should be medically indicated (i.e., to rule out radiculopathy, lumbar plexopathy, peripheral neuropathy). (2) Testing should be performed using EDX equipment that provides assessment of all parameters of the recorded signals. Studies performed with devices designed only for "screening purposes" rather than diagnosis is not acceptable. (3) The number of tests performed should be the minimum needed to establish an accurate diagnosis. (4) EMGs (Electromyography, needle not surface) must be performed by a physician specially trained in electrodiagnostic medicine, as these tests are simultaneously performed and interpreted. In this case there is insufficient documentation by the treating physician to support the medical necessity of an EMG study. Specifically, there is inadequate documentation to support the concern for radiculopathy as a component of the patient's symptoms. There is insufficient information on the nature of the patient's symptoms and there is insufficient documentation of a musculoskeletal/neurologic examination of the back and lower extremities to justify the need for an EMG. For these reasons, an EMG is not medically necessary at this time.

NCS for bilateral lower extremities: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG)-TWC Low Back Procedure Summary Online Version last updated 03/24/2015.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Chapter: Low Back Complaints Section: Nerve Conduction Studies.

Decision rationale: The Official Disability Guidelines comment on the use of nerve conduction studies for patients with low back complaints. These guidelines state that nerve conduction studies are not recommended. There is minimal justification for performing nerve conduction studies when a patient is presumed to have symptoms on the basis of radiculopathy. This systematic review and meta-analysis demonstrate that neurological testing procedures have limited overall diagnostic accuracy in detecting disc herniation with suspected radiculopathy. In the management of spine trauma with radicular symptoms, EMG/nerve conduction studies (NCS) often have low combined sensitivity and specificity in confirming root injury, and there is limited evidence to support the use of often uncomfortable and costly EMG/NCS. For this reason, nerve conduction studies of the bilateral lower extremities are not medically necessary.