

Case Number:	CM15-0079948		
Date Assigned:	04/30/2015	Date of Injury:	01/22/2014
Decision Date:	07/03/2015	UR Denial Date:	04/07/2015
Priority:	Standard	Application Received:	04/27/2015

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, North Carolina
 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 66 year old female, who sustained an industrial injury on January 22, 2014, incurring injuries to her head and neck. She was diagnosed with a cervical sprain and skull contusion. Treatment included work restrictions, medications and diagnostic imaging. Currently, the injured worker complained of left arm pain, left neck pain and spasms. The treatment plan that was requested for authorization included a left stellate ganglion block, medical clearance, history and physical, electrocardiogram and labs (CBC, CMP).

IMR ISSUES, DECISIONS AND RATIONALES

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

Left Stellate Ganglion Block: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Stellate ganglion blocks Page(s): 103.

Decision rationale: CA MTUS states that stellate ganglion blocks (SGB) are largely limited to diagnosis and therapy of chronic Regional pain Syndrome. There is no documentation of CRPS or any other indication for SGB found in this patient's records. In addition the request fails to specify whether the procedure is intended for the cervical or lumbar region of the body. Thus, medical necessity for this request cannot be established and it is deemed not medically necessary or appropriate.

Associated service: Medical clearance H & P: 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) , Low Back Chapter.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Stellate ganglion blocks Page(s): 103.

Decision rationale: Since the primary procedure is not medically necessary, none of the associated services are medically necessary.

Associated service: EKG: 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) , Low Back Chapter.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Stellate ganglion blocks Page(s): 103.

Decision rationale: Since the primary procedure is not medically necessary, none of the associated services are medically necessary.

Associated service: Labs (CBC, CMP): 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) , Low Back Chapter.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Stellate ganglion blocks Page(s): 103.

Decision rationale: Since the primary procedure is not medically necessary, none of the associated services are medically necessary.