

<b>Case Number:</b>	CM15-0091438		
<b>Date Assigned:</b>	05/15/2015	<b>Date of Injury:</b>	01/10/2013
<b>Decision Date:</b>	06/17/2015	<b>UR Denial Date:</b>	04/15/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	05/12/2015

### 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: California, Indiana, New York  
Certification(s)/Specialty: Internal 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 injured worker is a 39 year old male who sustained an industrial injury on January 10, 2013. He has reported injury to the right wrist and has been diagnosed with possible internal derangement, right wrist, cervical pain by history, low back pain by history, and left and right shoulder pain by history. Treatment has included medical imaging, medications, bracing, physical therapy, and modified work duty. The right wrist had intermittent slight pain, becoming intermittent slight to moderate with repetitive gripping and grasping. Objective findings noted limitation of right wrist motion. The treatment request included a MRI of the brain.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**1 MRI of the brain:** 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), Head (trauma, headaches, etc, not including stress & mental disorders).

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head section, MRI brain.

**Decision rationale:** Pursuant to the Official Disability Guidelines, MRI of the brain is not medically necessary. MRI scans are superior to scans for detection of intracranial pathology except for bone injuries such as fractures. Indications for MRI include, but are not limited to, determine neurologic deficits not explained by computed tomography; evaluate prolonged interval of disturbed consciousness; and to define evidence of acute changes superimposed on previous trauma or disease. A brain MRI is not indicated in patients who sustain a concussion/mild traumatic brain injury beyond the emergency phase except in conditions that have been rated or when red flags are noted. In this case, the injured worker's working diagnoses are depressive disorder; lumbosacral radiculopathy; pain disorder associated with both psychological factors and a general medical condition; and wrist tendinitis/bursitis. A CAT scan of the brain was performed December 7, 2013 (11 months after the date of injury). Findings were suggestive of cerebellar ectopia. There was an age-related change with an otherwise normal appearance superiorly. There is no documentation in the medical record from the requesting/treating provider indicating an MRI of the brain is clinically indicated. An internal medicine progress note dated February 23, 2015 does not contain objective clinical findings with a detailed neurologic evaluation. The requesting physician (for the MRI brain) is a [REDACTED]. The requesting progress note (according to the utilization review) dated April 8, 2015 is not present in the medical record. Consequently, absent clinical documentation from the requesting physician with a clinical indication and rationale for the MRI brain and a CAT scan of the brain performed on December 7, 2013 that did not show any acute abnormalities, MRI of the brain is not medically necessary.