

<b>Case Number:</b>	CM15-0094165		
<b>Date Assigned:</b>	05/20/2015	<b>Date of Injury:</b>	10/29/2013
<b>Decision Date:</b>	06/24/2015	<b>UR Denial Date:</b>	04/21/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	05/15/2015

### 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: 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:

The injured worker is a 36-year-old male who sustained an industrial injury on 10/29/13. The injured worker was diagnosed as having lumbar spine herniated nucleus pulposus, thoracic spine myoligamentous injury, cervical spine myoligamentous injury and secondary stress and anxiety. Currently, the injured worker was with complaints of back pain and neck stiffness with associated stress and anxiety. Previous treatments included activity modification, epidural steroid injection, and transcutaneous electrical nerve stimulation unit and medication management. Previous diagnostic studies included a magnetic resonance imaging revealing disc dessication and disc herniation in the lumbar spine and deformities at several levels of the thoracic region. The plan of care was for an orthopedic mattress.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Orthopedic Mattress:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Treatment in Workers' Compensation.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Low Back Section/Mattress Selection.

**Decision rationale:** MTUS guidelines do not address the use of a special mattress for medical treatment; therefore, alternative guidelines were consulted. Per the Official Disability Guidelines when choosing a mattress, it is not recommended to use firmness as sole criteria. In a recent RCT, a waterbed (Aqua) and a body-contour foam mattress (Tempur) generally influenced back symptoms, function, and sleep more positively than a hard mattress, but the differences were small. The dominant problem in this study was the large amount of dropouts. The predominant reason for dropping out before the trial involved the waterbed, and there was some prejudice towards this type of mattress. The hard mattress had the largest amount of test persons who stopped during the trial due to worsening LBP, as users were more likely to turn around in the bed during the night because of pressures on predominating body parts. Another clinical trial concluded that patients with medium-firm mattresses had better outcomes than patients with firm mattresses for pain in bed, pain on rising, and disability; a mattress of medium firmness improves pain and disability among patients with chronic non-specific low-back pain. There are no high quality studies to support purchase of any type of specialized mattress or bedding as a treatment for low back pain. Mattress selection is subjective and depends on personal preference and individual factors. On the other hand, pressure ulcers (e.g., from spinal cord injury) may be treated by special support surfaces (including beds, mattresses and cushions) designed to redistribute pressure. These guidelines recommend against purchasing any type of specialized mattress in the treatment of low back pain. The request for orthopedic mattress is not medically necessary.