

<b>Case Number:</b>	CM15-0096562		
<b>Date Assigned:</b>	05/28/2015	<b>Date of Injury:</b>	04/03/2013
<b>Decision Date:</b>	07/07/2015	<b>UR Denial Date:</b>	04/20/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	05/19/2015

### 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: Physical Medicine & Rehabilitation

### 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 injury was sustained when the injured worker was lifting concrete fire doors weighing over 100 pounds, the injured worker had an onset of low back pain with radiation of pain in the right lower thigh and calf to the dorsum of the right foot and great toe with pain, numbness and paresthesias in the same distribution. The injured worker previously received the following treatments physical therapy, TENS (transcutaneous electrical nerve stimulator) unit, microscopic lumbar laminectomy, laminotomy and disc excision at the 4-5 levels, lumbar spine MRI, Norco, Ambien, Omeprazole, Motrin, low back brace, EMG (electrodiagnostic study) of the lower extremities findings were suggestive of bilateral chronic active L4-L5 radiculopathy, right side greater than the left and lumbar spine MRI. The injured worker was diagnosed with HPN (herniated nucleus pulposus) of the lumbar spine with right L5 with right lower leg radiculopathy and microscopic lumbar laminectomy, laminotomy and disc excision at the 4-5 levels. According to progress note of February 9, 2015, the injured workers chief complaint was lumbar spine pain. The injured worker's pain was much improved since back surgery. The injured worker described the pain as moderate with radiation of pain into the leg. The symptoms included tingling, stabbing pain, weakness and numbness. The injured worker rated the pain 3 out of 10. The injured worker was taking Omeprazole and Ibuprofen for pain. The physical exam noted decreased range of motion in all plans. The straight leg raises was negative bilaterally. The Fabere was positive bilaterally. The S1 joint tenderness, the bilateral lower extremity examination reveals sensation was intact. The motor strength was intact 5 out of 5. The

treatment plan included OrthoPAT machine rental, supplies, technician hours and Auto-transfusion processing.

### **IMR ISSUES, DECISIONS AND RATIONALES**

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

**OrthoPAT machine, rental:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation [www.ncbi.nlm.nih.gov/pmc/articles/pmc3136591/](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc3136591/).

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation IOWA Orthopedic Journal at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3215119/>.

**Decision rationale:** The patient complains of mild low back pain and improving right leg pain, as per progress report dated 04/09/15. The request is for Orthopat machine rental, as per 04/01/15 order. There is no RFA for this case, and the patient's date of injury is 04/03/13. The patient is status post lumbar laminectomy and discectomy at L4-5 from the right on 01/06/15, as per progress report dated 04/09/15. The patient has been diagnosed with herniated nucleus pulposus at L4-5 with L5 radiculopathy. The patient has been allowed to work with restrictions, as per the same progress report. MTUS, ODG and ACOEM guidelines do not discuss the OrthoPat. As per a study published in the 2011 issue of the IOWA Orthopedic Journal at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3215119/>, "It is recommended that the efficacy and cost of blood salvage systems be systematically evaluated prior to their routine use in orthopedic surgical patient populations. The results of this study suggest that the use of blood salvage systems should be considered only in patient populations most at risk for blood transfusion." In this case, none of the progress reports discusses the need for OrthoPat. The patient underwent lumbar laminectomy and discectomy at L4-5 from the right on 01/06/15. The reports, however, do not document the use of this machine or the risk for blood transfusion either. The purpose of this request is not clear. Given the lack of documentation, the request is not medically necessary.

**OrthoPAT supplies:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation [www.ncbi.nlm.nih.gov/pmc/articles/pmc3136591/](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc3136591/).

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation IOWA Orthopedic Journal at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3215119/>.

**Decision rationale:** The patient complains of mild low back pain and improving right leg pain, as per progress report dated 04/09/15. The request is for Orthopat supplies, per 04/01/15 order.

There is no RFA for this case, and the patient's date of injury is 04/03/13. The patient is status post lumbar laminectomy and discectomy at L4-5 from the right on 01/06/15, as per progress report dated 04/09/15. The patient has been diagnosed with herniated nucleus pulposus at L4-5 with L5 radiculopathy. The patient has been allowed to work with restrictions, as per the same progress report. MTUS, ODG and ACOEM guidelines do not discuss the OrthoPat. As per a study published in the 2011 issue of the IOWA Orthopedic Journal at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3215119/>, "It is recommended that the efficacy and cost of blood salvage systems be systematically evaluated prior to their routine use in orthopedic surgical patient populations. The results of this study suggest that the use of blood salvage systems should be considered only in patient populations most at risk for blood transfusion." In this case, OrthoPat is not authorized due to lack of relevant documentation indicating the purpose of the request. Consequently, the request for supplies is not medically necessary as well.

**OrthoPAT technician hours:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation [www.ncbi.nlm.nih.gov/pmc/articles/pmc3136591/](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc3136591/).

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation IOWA Orthopedic Journal at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3215119/>.

**Decision rationale:** The patient complains of mild low back pain and improving right leg pain, as per progress report dated 04/09/15. The request is for Orthopat technician hours, per 04/01/15 order. There is no RFA for this case, and the patient's date of injury is 04/03/13. The patient is status post lumbar laminectomy and discectomy at L4-5 from the right on 01/06/15, as per progress report dated 04/09/15. The patient has been diagnosed with herniated nucleus pulposus at L4-5 with L5 radiculopathy. The patient has been allowed to work with restrictions, as per the same progress report. MTUS, ODG and ACOEM guidelines do not discuss the OrthoPat. As per a study published in the 2011 issue of the IOWA Orthopedic Journal at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3215119/>, "It is recommended that the efficacy and cost of blood salvage systems be systematically evaluated prior to their routine use in orthopedic surgical patient populations. The results of this study suggest that the use of blood salvage systems should be considered only in patient populations most at risk for blood transfusion." In this case, OrthoPat is not authorized due to lack of relevant documentation indicating the purpose of the request. Consequently, the request for technician is not medically necessary as well.

**Autotransfusion processing:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation [www.ncbi.nlm.nih.gov/pubmed/10947618](http://www.ncbi.nlm.nih.gov/pubmed/10947618).

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation IOWA Orthopedic Journal at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3215119/>.

**Decision rationale:** The patient complains of mild low back pain and improving right leg pain, as per progress report dated 04/09/15. The request is for autotransfusion processing, per order 04/01/15. There is no RFA for this case, and the patient's date of injury is 04/03/13. The patient is status post lumbar laminectomy and discectomy at L4-5 from the right on 01/06/15, as per progress report dated 04/09/15. The patient has been diagnosed with herniated nucleus pulposus at L4-5 with L5 radiculopathy. The patient has been allowed to work with restrictions, as per the same progress report. MTUS, ODG and ACOEM guidelines do not discuss the OrthoPat. As per a study published in the 2011 issue of the IOWA Orthopedic Journal at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3215119/>, "It is recommended that the efficacy and cost of blood salvage systems be systematically evaluated prior to their routine use in orthopedic surgical patient populations. The results of this study suggest that the use of blood salvage systems should be considered only in patient populations most at risk for blood transfusion." In this case, none of the progress reports discusses the need for auto transfusion. The patient underwent lumbar laminectomy and discectomy at L4-5 from the right on 01/06/15. The reports, however, do not document the use of this procedure. The purpose of this request is not clear. Given the lack of documentation, the request is not medically necessary.