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| Case Number: | CM15-0096965 | | |
| Date Assigned: | 05/27/2015 | Date of Injury: | 09/16/2014 |
| Decision Date: | 07/24/2015 | UR Denial Date: | 05/11/2015 |
| Priority: | Standard | Application Received: | 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: Texas, 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:

This is a 49-year-old male patient, who sustained an industrial injury on September 16, 2014. He reported bilateral knees, right hip, bilateral shoulder, and neck and head pain following a motor vehicle accident. The diagnoses include right rotator cuff tear as evidenced by radiographic imaging, left rotator cuff syndrome, post concussive syndrome and cervical and lumbar sprain/strain. Per the doctor's note dated 6/4/2015, she had tinnitus, intermittent headache, poor concentration, forgetfulness, anxiety, depression and insomnia. The physical examination revealed tenderness and decreased range of motion of the cervical spine and right shoulder; positive Hawkin's sign. Per the doctor's note dated 5/1/2015, he had complains of ringing in the ears, intermittent headaches, lack of concentration, bilateral knee pain, right hip pain, bilateral shoulder pain, neck pain and head pain. The medications list includes Iodine and flexeril. He reported an industrial injury in 2014, resulting in the above noted pain. He was treated conservatively without complete resolution of the pain. Noise cancelling headphones were recommended. He has had multiple diagnostic studies including head CT scan dated 10/8/2014; right shoulder MRI; MRI brain dated 6/10/2015 which revealed no abnormal intracranial process and soft tissue mass in the right ethmoid air cells and extending into the right maxillary sinus; left shoulder MRI dated 6/10/2015. Treatment to date has included diagnostic studies, radiographic imaging, physical therapy, medications and work restrictions. A noise guard headset was requested.

IMR ISSUES, DECISIONS AND RATIONALES

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

Noise guard headset: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.osha.gov/Publications/OSHA3074/osha3074.html>.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Chapter: Head (updated 01/21/15) Hearing protection.

Decision rationale: Q-Noise guard headset. Per the cited guidelines regarding hearing protection "Recommend interventions to improve the use of hearing protection devices. The evidence found in this review shows that some interventions improve the mean use of hearing protection devices compared to non-intervention. A tailored strategy (the use of communication or other types of interventions that are specific to an individual or a group and aim to change behavior) showed an improvement in hearing protective devices (HPDs) use of 8.3% versus education at 6.1%. (El Dib - Cochrane, 2009)" Per the records provided patient has complaints of ringing in the ears, intermittent headaches, lack of concentration and sensitivity to sound. Hearing protection device is medically appropriate in this patient to improve his concentration and to decrease sensitivity to sound. However rationale for not using an off the shelf simple device- earplug is not specified in the records provided. The medical necessity of Noise guard headset is not medically necessary for this patient.