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| Case Number: | CM14-0145727 | | |
| Date Assigned: | 09/12/2014 | Date of Injury: | 07/21/2007 |
| Decision Date: | 10/22/2014 | UR Denial Date: | 08/11/2014 |
| Priority: | Standard | Application Received: | 09/08/2014 |

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. The expert reviewer is Board Certified in Orthopedic Surgery and is licensed to practice in Texas. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

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 31 year old female who had work related injuries on 07/21/07. Mechanism of injury was not documented. The patient underwent fusion at L5-S1 date unknown. Most recent clinical documentation submitted for review was dated /09/08/14. The injured worker presented with complaints of low back pain and right shoulder pain and stiffness, sleeplessness, headaches, and numbness in both hands and swelling in right foot. No improvement from last visit of 09/05/14. Results from MRI of the lumbar spine were normal. [REDACTED] discussed with the injured worker the possible cause of continued increased pain could be due to the retained hardware. [REDACTED] requested consult with pain management specialist for cervical epidural steroid injection and hardware lumbar spine block. Apparently [REDACTED] evaluated the injured worker and would schedule an appointment for injection at the hardware site. Appointment was still pending. No physical examination at this visit. Physical examination on 07/08/14 revealed well healed midline scar. There was pain and tenderness over the top of palpable hardware, most pronounced on the right side. There was tenderness not only to deep but also superficial palpation. Range of motion, standing flexion/extension guarded and restricted. No clinical evidence of instability on exam. L5-S1 dysesthesia was noted. There was residual right foot hypersensitivity. Hardware block was given in the lumbar spine using 3cc of Celestone, 7cc of lidocaine, and 7cc of Marcaine. The patient tolerated the procedure well without any local adverse symptomatic or systemic complication. The patient had significant symptomatic relief subsequent to the injection with almost complete relief of her low back pain. This served both as a diagnostic purpose with hopefully some therapeutic effect. New flexion/extension radiographs of the lumbar spine revealed rod and screw fixation at L5-S1 and solid bone incorporation. There was some osteolysis around the screws. Diagnosis cervical discopathy with radiculitis. Right shoulder impingement syndrome confirmed both clinically

and on MRI. Positive L5-S1 discogram. Status post posterior lumbar interbody fusion at L5-S1. Retained symptomatic lumbar spine hardware. Prior utilization review on 08/11/14 was non-certified. Current request was for L5-S1 removal of lumbar spine hardware with inspection fusion. Medical clearance with internist. Day inpatient stay at [REDACTED]

IMR ISSUES, DECISIONS AND RATIONALES

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

L5-S1 Removal of Lumbar Spinal Hardware with Inspection of Fusion: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG, Low Back - Lumbar & Thoracic (Acute and Chronic)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Guidelines (ODG)Low back chapter, hardware removal

Decision rationale: The patient not only has tenderness to palpation along the hardware, she also had almost complete resolution of her back pain following hardware block. X-rays stated that she had solid fusion, with retained hardware in place. Because of the positive response to hardware block and she had tenderness to palpation along the hardware medical necessity has been established. Therefore, the request for L5-S1 removal of Lumbar Spine Hardware with inspection of fusion is medically necessary.

Medical Clearance with Internist: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Surgery General Information and Ground Rules, California Official medical Free Schedule, pages, 92-93.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG) Low back chapter, Office visits

Decision rationale: The patient is a 31 year old female with no documented history of any medical problems. As such medical necessity has not been established. The request is not medically necessary.

Day Inpatient Stay at [REDACTED]: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG, Hospital Length of Stay (LOS) guidelines.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG)Low back chapter, Hospital length of stay

Decision rationale: Removal of hardware requires a deep skin incision with retraction of the muscles. Overnight stay would be medically necessary to address the pain. As such medical necessity has been established. The request is medical necessary.