

<b>Case Number:</b>	CM13-0002267		
<b>Date Assigned:</b>	12/27/2013	<b>Date of Injury:</b>	08/05/2011
<b>Decision Date:</b>	03/10/2014	<b>UR Denial Date:</b>	07/16/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/22/2013

### HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Orthopedic Surgery, and is licensed to practice in California. 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 physician 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 patient is a 50-year-old female, who was injured on 08/15/11 and has been treated for shoulder and neck pain. At the 12/12/13 office visit with the provider, surgery for the right shoulder was recommended. The provider documented concern regarding a history of idiopathic thrombocytopenia purpura and that he felt that the patient was at high risk of bleeding with surgery, and recommended a hematology consult in the perioperative period in the event that there were issues related to bleeding. There has also been concern over daily headaches and the provider has recommended a consultation with neurology for this problem.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Outpatient referral to Neurology for headache:** Overturned

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management. Decision based on Non-MTUS Citation Independent Medical Examinations and Consultations (ACOEM Practice Guidelines, 2nd Edition (2004), Chapter 7), pg. 127.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Independent Medical Examinations and Consultations (ACOEM Practice Guidelines, 2nd Edition (2004), Chapter 7), pg. 127.

**Decision rationale:** The ACOEM guidelines indicate that the occupational practitioner may refer to other specialist if the diagnosis is uncertain or complex or when the plan or course of care may benefit from additional expertise. In this case, the orthopedic doctor is concerned about headaches and has requested referral to neurology. Clearly, there are neurologic issues outside of the scope of the practice of an orthopedic surgeon. Therefore, neurology consultation would be considered medically necessary and appropriate in this case based upon on the ACOEM Guidelines.

**Outpatient referral to Hematology for right shoulder preoperative medical clearance:**  
Overturned

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management. Decision based on Non-MTUS Citation Independent Medical Examinations and Consultations (ACOEM Practice Guidelines, 2nd Edition (2004), Chapter 7), pg. 127.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Independent Medical Examinations and Consultations (ACOEM Practice Guidelines, 2nd Edition (2004), Chapter 7), pg. 127.

**Decision rationale:** The ACOEM guidelines indicate that the occupational practitioner may refer to other specialist if the diagnosis is uncertain or complex or when the plan or course of care may benefit from additional expertise. In this case, the orthopedic doctor is concerned about a bleeding disorder and managing this problem in the perioperative period, and therefore, has requested a hematology consult. Clearly, these hematologic issues are outside of the scope of the practice of an orthopedic surgeon. Therefore, a hematology consult would be considered medically necessary and appropriate in this case based upon on the ACOEM Guidelines