

Case Number:	CM13-0018040		
Date Assigned:	10/11/2013	Date of Injury:	06/23/2003
Decision Date:	01/21/2014	UR Denial Date:	08/20/2013
Priority:	Standard	Application Received:	08/29/2013

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 Internal Medicine 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 claimant is a 79 year old male who sustained a work related injury on 06/23/2003. The mechanism of injury was related to stress in the work place. He has diagnoses of coronary artery disease and mitral valve prolapse with mitral regurgitation. His other medical diagnoses include abdominal aortic aneurysm status post (s/p) repair, hypertension, hyperlipidemia, cerebral vascular accident (CVA), and s/p left carotid endarterectomy. The claimant is s/p percutaneous transluminal coronary angioplasty (PTCA) with stent placement in the right coronary artery on 07/31/2003 with repeat coronary cath on 04/24/06 which revealed chronic right coronary artery occlusion with collaterals and inferior wall ischemia. On his most recent exam on 08/12/2013 his blood pressure was stable and he denied any complaints of chest pain or shortness of breath. The treating provider has requested a stress nuclear myocardial perfusion study and 2D echocardiography with Doppler.

IMR ISSUES, DECISIONS AND RATIONALES

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

One stress nuclear perfusion study: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Decision on the 2012 ACCF/AHA/ACP/AATS/PCNA/SCAI/STS guideline for the diagnosis and management of patients with stable ischemic heart disease. 2012 Dec 18, NGC:009551.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation decision on 2013 Current Medical Diagnoses and Treatment-Stephen McPhee/Maxine A. Papdakis- pgs. 352-354.

Decision rationale: There is no documentation provided necessitating the requested stress nuclear myocardial perfusion study. The claimant has stable coronary artery disease. He has no baseline EKG changes. Exercise stress with nuclear myocardial perfusion imaging is indicated for patients who have uninterpretable EKG and at least moderate physical functioning. It may also be indicated to confirm results of an exercise EKG when the results are contrary to the clinical impression, to localize the region of ischemia, to distinguish ischemia from infarcted myocardium or to assess the completeness of vascularization following bypass surgery or coronary angioplasty. Per the claimant's last evaluation he is medically stable on his medical therapy. Medical necessity for the requested service has not been established. The requested service is not medically necessary.

2D echocardiography with Doppler: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACCF/AHA/ACP/AATS/PCNA/SCAI/STS guideline for the diagnosis and management of patients with stable ischemic heart disease. 2012 Dec 18, NGC:009551.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation 2013 Current Medical Diagnoses and Treatment-Stephen McPhee/Maxine A. Papdakis- pgs. 341, 352-354.

Decision rationale: There is no documentation provided necessitating the requested 2D echocardiography with Doppler. The claimant has stable coronary artery disease with known mitral valve prolapse with mitral regurgitation. He has undergone coronary arteriography x 2 and echocardiograms. There is no specific documentation of valvular incompetence or recent episode of congestive heart failure. The claimant is medically stable on his present medical regimen. Medical necessity for the requested service has not been established. The requested service is not medically necessary.