

Case Number:	CM13-0019850		
Date Assigned:	11/08/2013	Date of Injury:	11/13/2007
Decision Date:	08/13/2014	UR Denial Date:	08/07/2013
Priority:	Standard	Application Received:	08/30/2013

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 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 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:

This is a 69-year-old female social service worker who sustained a vocational injury on November 13, 2007 when she fell. The records provided for review include a prior Utilization Review Determination that certified a right shoulder diagnostic/operative arthroscopic debridement with acromioplasty, resection of coracoid ligament and bursa and indicated possible distal clavicle resection with rotator cuff repair, twelve postoperative PT sessions, medical clearance, perioperative antibiotics and an assistant surgeon. The current request is for deep vein thrombosis prophylaxis.

IMR ISSUES, DECISIONS AND RATIONALES

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

DEEP VEIN THROMBOSIS (DVT) PROPHYLAXIS: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG); Shoulder chapter - Venous Thrombosis Venous thrombosis.

Decision rationale: The California MTUS and ACOEM Guidelines do not address this request. The Official Disability Guidelines state that the risk of DVT related to surgical intervention is

lower in the upper extremities as opposed to lower extremity surgical intervention. Currently, the use of DVT prophylaxis is not generally recommended in shoulder arthroscopy procedures. The medical records do not document that the claimant has a history of DVT, poor circulation, cardiovascular issues, or is at high or increased risk for DVT following her right shoulder surgical intervention. Therefore, based on the documentation presented for review and in accordance with Official Disability Guidelines, the request for DVT prophylaxis in this case cannot be considered medically necessary.