

Case Number:	CM13-0026146		
Date Assigned:	03/14/2014	Date of Injury:	08/29/2012
Decision Date:	04/23/2014	UR Denial Date:	09/16/2013
Priority:	Standard	Application Received:	09/18/2013

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 Internal Medicine, and is licensed to practice in New York. 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 patient is a 47 year old male with a date of injury on 08/29/2012. He was a fork lift operator who was struck by another fork lift; he was able to break his fall by holding on to the handle. The diagnosis was neck strain and back pain. On 02/12/2013 the HbA1c was 6.4. On 03/12/2013 he was 5'8" tall and weighed 250 pounds. On 04/25/2013 it was noted that he had hypertension prior to the injury and that it was worse after the injury. "After the injury high blood pressure got worse and he began to experience blurry vision." The blurry vision was one month after the injury. On 09/20/2013 magnetic resonance imaging (MRI) of the neck and low back revealed degenerative changes. It was noted that he had a history of diabetes and hypertension. He was 5'8" and weighed 250 pounds. On 08/11/2013 he had a blood pressure of 163/92. This was an ophthalmology office visit and he had retinopathy. The remainder of the exam was normal. He had back pain. He was taking Norco and Tylenol. On 09/17/2013 he had an office visit. He had neck pain radiating to the upper extremities. He also had bilateral shoulder, bilateral knee and bilateral wrist pain and back pain since the date of injury.

IMR ISSUES, DECISIONS AND RATIONALES

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

DIOVAN 80MG ONCE DAILY: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation HARRISON'S PRINCIPLES OF INTERNAL MEDICINE 18TH EDITION 2011.

Decision rationale: The injury did not cause hypertension. He had hypertension prior to the injury. While acute pain may increase a blood pressure measurement, it is not the cause of hypertension. Medical Treatment Utilization Schedule (MTUS) American College of Occupational and Environmental Medicine (ACOEM) and Official Disability Guidelines (ODG) guidelines discuss the treatment of low back pain, neck pain, shoulder pain, knee pain and all of the patient's injuries, yet there is no mention of Diovan as a treatment in any of those guidelines. He continues to have elevated blood pressure readings during office visits, yet there is no change in his medications for hypertension. Diovan was not part of the treatment for any of his injuries from the date of injury. It is not medically necessary for the treatment of his injuries and it is unclear if it is effective treatment for the patient's hypertension.

ATENOLOL 25MG TWICE DAILY: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation HARRISON'S PRINCIPLES OF INTERNAL MEDICINE 18TH EDITION 2011.

Decision rationale: While acute pain may increase a blood pressure measurement, it is not the cause of hypertension. Medical Treatment Utilization Schedule (MTUS) American College of Occupational and Environmental Medicine (ACOEM) and Official Disability Guidelines (ODG) guidelines discuss the treatment of low back pain, neck pain, shoulder pain, knee pain and all of the patient's injuries, yet there is no mention of Atenolol as a treatment in any of those guidelines. He continues to have elevated blood pressure readings during office visits, yet there is no change in his medications for hypertension. Atenolol was not part of the treatment for any of his injuries from the date of injury. It is not medically necessary for the treatment of his injuries and it is unclear if it is effective treatment for the patient's hypertension.

BABY ASPIRIN (QUANTITY UNSPECIFIED): Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation HARRISON'S PRINCIPLES OF INTERNAL MEDICINE 18TH EDITION 2011.

Decision rationale: The injury did not cause hypertension. He had hypertension prior to the injury. While acute pain may increase a blood pressure measurement, it is not the cause of hypertension. Medical Treatment Utilization Schedule (MTUS) American College of

Occupational and Environmental Medicine (ACOEM) and Official Disability Guidelines (ODG) guidelines discuss the treatment of low back pain, neck pain, shoulder pain, knee pain and all of the patient's injuries, yet there is no mention of baby acetylsalicylic acid or (aspirin) as a treatment in any of those guidelines. He continues to have elevated blood pressure readings during office visits, yet there is no change in his medications for hypertension. Baby aspirin was not part of the treatment for any of his injuries from the date of injury. It is not medically necessary for the treatment of his injuries.