

Case Number:	CM13-0026261		
Date Assigned:	11/22/2013	Date of Injury:	06/02/1997
Decision Date:	01/23/2014	UR Denial Date:	09/12/2013
Priority:	Standard	Application Received:	09/18/2013

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 43-year-old male who reportedly suffered an injury to his back on 06/02/97. The request is to determine the medical necessity of a preoperative EKG in preparation for a spinal fusion.

IMR ISSUES, DECISIONS AND RATIONALES

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

A preoperative electrocardiogram for a planned spinal fusion: Overturned

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

MAXIMUS guideline: Decision based on MTUS ACOEM Page(s): s 132-139. Decision based on Non-MTUS Citation IME and Consultations and the Official Disability Guidelines (ODG), Criteria for Preoperative EKG.

Decision rationale: The medical records document that this gentleman has a history of hypertension as well as history of cardiac disease. That history along with his age as well as the planned complex and lengthy spinal procedure would warrant a thorough a medical evaluation including EKG. Not only would most hospitals require an EKG for an individual over 53, the positive history of hypertension and cardiovascular disease as well as the proposed complex and lengthy surgery would certainly warrant that in this setting. As such, I would recommend

reversal of the adverse determination, as the request is considered reasonable and medically necessary in this setting.