

Case Number:	CM13-0033687		
Date Assigned:	12/06/2013	Date of Injury:	02/14/2003
Decision Date:	03/26/2014	UR Denial Date:	09/12/2013
Priority:	Standard	Application Received:	10/10/2013

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 ABFP, has a subspecialty in ABPM 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.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

55 yr. old female claimant sustained a work injury on 2/14/03 resulting in back pain and lower extremity weakness. Her diagnosis included sacroiliac pain, shoulder pain, muscle spasms, radiculopathy and low back pain. Her pain was managed with opioids and muscle relaxants. She has had a right sacroiliac fusion and a DVT complication post-operatively which requires her to be on Coumadin. Her other medical history included hyperlipidemia (treated with Simvastatin) and hypertension. A request was made on 9/4/13 for a hepatic function panel.

IMR ISSUES, DECISIONS AND RATIONALES

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

A hepatic function panel: Overturned

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Tizandine/Muscle relaxants Page(s): 66.

Decision rationale: Tizandine is to be used with caution in renal impairment; should be avoided in hepatic impairment. Tizandine use has been associated with hepatic aminotransaminase elevations that are usually asymptomatic and reversible with discontinuation. In this case, the claimant is on opioids containing Tylenol, and lipid lowering drugs (Simvastatin) all of which are metabolized by the liver. It is therefore reasonable to evaluate liver function to avoid risk of liver toxicity. It is therefore medically appropriate to obtain a hepatic panel.

