

Case Number:	CM13-0053987		
Date Assigned:	12/30/2013	Date of Injury:	07/12/2011
Decision Date:	03/14/2014	UR Denial Date:	10/31/2013
Priority:	Standard	Application Received:	11/12/2013

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 Texas. 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 60-year-old male who reported injury on 07/12/2011. The mechanism of injury was noted to be the patient was lifting bottles of wine. The patient's diagnoses were noted to include lumbar radiculopathy and sprain or strain of the lumbar region. The request was made for pre-op labs.

IMR ISSUES, DECISIONS AND RATIONALES

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

The request for pre-op labs: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Treatment in Workers's Comp 16th Edition, 2013 Updates.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back Chapter, Preoperative lab testing.

Decision rationale: The Official Disability Guidelines indicate the criteria for preoperative lab testing includes preoperative urinalysis for patients who are undergoing invasive urologic procedures and those undergoing implantation of foreign material, electrolyte and creatinine testing for patient with underlying chronic disease and those taking medications that predispose

them to electrolyte abnormalities or renal failure, random glucose testing for patients at high risk of undiagnosed diabetes mellitus, a complete blood count for patients with diseases that increase the risk of anemia, or patients in whom significant perioperative blood loss is anticipated and coagulation studies for patients with a history of bleeding or medical conditions that predispose them to bleeding, and for those taking anticoagulants. There was no clinical documentation submitted the above. Given the above, the request for pre-op labs is not medically necessary.