

Case Number:	CM13-0058130		
Date Assigned:	06/09/2014	Date of Injury:	10/31/2008
Decision Date:	07/23/2014	UR Denial Date:	11/07/2013
Priority:	Standard	Application Received:	11/26/2013

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 Family Practice 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:

The claimant is a 52-year-old female, who sustained a work related injury on October 31, 2008 involving the back and lower extremities. She had a diagnosis of tarsal tunnel syndrome, C5 radiculopathy and S1 radiculopathy. The claimant was scheduled for tarsal tunnel release and pre-operative tests were ordered including: pregnancy test, EKG and urinalysis.

IMR ISSUES, DECISIONS AND RATIONALES

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

PREGNANCY TEST: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Online Version Preoperative testing, general.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Pre-operative pregnancy testing - Canadian Journal of Plastics 2012.

Decision rationale: Pre-operative pregnancy testing is appropriate in menstruating women and up to 1-year after menopause is suspected. In this case, there is no documentation of menstrual history to indicate the need for a pregnancy test and is therefore not medically necessary.

ELECTROCARDIOGRAPHY: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Online Version Preoperative testing, general.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation AAFP Pre-operative Cardiovascular Testing for Non-Cardiac Surgery, 2008; as well as the American Heart Guidelines, circulation 2001 pg 418-500.

Decision rationale: The claimant has no history of cardiac disease and the clinical notes do not indicate that the claimant is unable to perform activities that cause fatigue or chest pain. Guidelines do not recommend an EKG for low risk patients in non-emergent/low risk surgeries. Therefore, the request is not medically necessary.

URINALYSIS: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Online Version Preoperative testing, general.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American Academy of Family Physicians- Pre-operative Evaluation - 2000.

Decision rationale: Guidelines state that there is little evidence that an abnormal result of a urinalysis is associated with postoperative complications and predictive values of routine urinalysis in asymptomatic patients are poor. Guideline consensus is that routine urinalysis is not recommended in asymptomatic patients except in those undergoing surgical implantation of foreign material (e.g., prosthetic joint, heart valve) or invasive urologic procedures. Based on the above, a urinalysis is not medically necessary.