

Case Number:	CM13-0058569		
Date Assigned:	12/30/2013	Date of Injury:	01/30/2003
Decision Date:	09/17/2014	UR Denial Date:	11/06/2013
Priority:	Standard	Application Received:	11/27/2013

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 Pulmonary Diseases 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 injured worker is a 64-year-old female with a reported date of injury on January 30, 2003. The mechanism of injury was a trip and a fall. The injured worker was diagnosed with gastro esophageal reflux disease secondary to NSAIDs, irritable bowel syndrome, hemorrhoids secondary to constipation, diabetes mellitus, hypertension, hyperlipidemia, obstructive sleep apnea, peripheral edema, hyperkalemia, hyperuricemia, and elevated liver function test, rule out secondary to tramadol. Prior treatments included physical therapy, Synvisc injections to the knee in 2004, knee bracing, use of a cane, and medications. Surgical history included knee arthroscopy in March 2003 and a rotator cuff repair to the right shoulder in March 2004. The clinical note dated April 18, 2013 noted the injured worker had worsening diabetes, which was controlled with medication. The injured worker had an average blood glucose level of 150 mg/dL. The injured worker reported hemorrhoids and irritable bowel syndrome. The physician noted there were no changes to the injured worker's hypertension, shortness of breath, gastro esophageal reflux disease, chest pain, or insomnia. The injured worker reported one occurrence of bright red blood per rectum. The injured worker's blood glucose level was 184 mg/dL with glyburide taken at 7am. Upon examination of the extremities, there was no clubbing or edema present. The injured worker had gastro esophageal reflux disease after treating her work related injury with anti-inflammatory medications. In conjunction with the injured worker's elevated levels of stress, she experienced increased gastric acid production, which irritated the mucosal lining of her stomach. The injured worker was also diagnosed with hyperlipidemia, which the physician considered to be sequelae of both hypertension and diabetes, which required treatment to stabilize the injured worker's overall condition. The physician indicated a urine drug screen which was performed on March 14, 2013 remarkable for the following, including Bupropion metabolite, venlafaxine, venlafaxine metabolite, O-desmethylvenlafaxine and hydroxybupropion.

The physician recommended laboratory monitoring be performed the following month. A urine drug screen was performed on May 08, 2013, which was positive for tramadol. The injured worker's medication regimen included AppTrim, Ranitidine, Gaviscon, Colace, Lovaza, Metformin, probiotics, Crestor, Proctosol HC cream, Dexilant, glyburide, and Citrucel. The physician's treatment plan included recommendations for the injured worker to undergo laboratory monitoring at the next visit, undergo diagnostic studies including an EKG, a 2D echo with Doppler, and an abdominal ultrasound, and a recommendation for the injured worker to be seen by an ophthalmologist. The physician's rationale for the requested laboratory monitoring was not provided. The Request for Authorization was not submitted.

IMR ISSUES, DECISIONS AND RATIONALES

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

Accu-Check Blood Glucose Test (performed on 06/17/2013): 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 Official Disability Guidelines (ODG) Diabetes, Glucose monitoring.

Decision rationale: The request for accu-check blood glucose test performed on 06/17/2013 is not medically necessary. The Official Disability Guidelines recommend self-monitoring of blood glucose (SMBG) for people with type 1 diabetes as well as for those with type 2 diabetes who use insulin therapy, plus long-term assessment, but not continuous glucose monitoring (CGM) for routine use. SMBG should be performed by all patients using insulin (minimum of twice daily and ideally at least before any injection of insulin). Within the provided documentation the requesting physician did not include a clinical note from the date of the evaluation which demonstrated the physician's rationale for performing blood Accu-check blood glucose monitoring in the office. There is a lack of documentation within the medical records demonstrating why the injured worker required Accu-check blood glucose monitoring at the office visit. As such, the request for accu-check blood glucose test performed on 06/17/2013 is not medically necessary.

Comprehensive Metabolic Panel (performed on 06/17/2013): Upheld

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 NSAIDs, specific drug list & adverse effects Page(s): 70.

Decision rationale: The request for comprehensive metabolic panel (CMP) performed on 06/17/2013 is not medically necessary. The California MTUS guidelines note periodic lab monitoring of a CBC and chemistry profile (including liver and renal function tests) is

recommended with the use of NSAIDs. There has been a recommendation to measure liver transaminases within 4 to 8 weeks after starting therapy, but the interval of repeating lab tests after this treatment duration has not been established. Within the provided documentation it is not indicated when the injured worker last underwent a comprehensive metabolic panel prior to 06/17/2013. There is a lack of documentation indicating the results of any prior testing. The physician's rationale for the requested testing is not indicated. There is a lack of documentation, which indicates the injured worker's need for performance of a comprehensive metabolic panel. As such, the request for comprehensive metabolic panel (CMP) performed on 06/17/2013 is not medically necessary.

Lipid Panel (performed on 06/17/2013): 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 Lipid Profile, Lab Tests Online, Online database.

Decision rationale: The request for lipid panel performed on 06/17/2013 is not medically necessary. Lab tests online states it is recommended that healthy adults with no other risk factors for heart disease be tested with a fasting lipid profile once every five years. Initial screening may involve only a single test for total cholesterol and not a full lipid profile; however, if the screening cholesterol test result is high, additional testing with a lipid profile may be needed. If other risk factors are present or if previous testing revealed a high cholesterol level in the past, more frequent testing with a full lipid profile is recommended. Risk factors other than high low-density lipoprotein cholesterol (LDL-C) include cigarette smoking, age (males 45 years or older or females 50-55 years or older), low HDL cholesterol (less than 40 mg/dL (1.04 mmol/L), hypertension, family history of premature heart disease, and diabetes. Per the provided documentation, the physician noted the injured worker was diagnosed with hyperlipidemia. The injured worker was prescribed Lovaza and Crestor. The requesting physician's rationale for the request is not indicated within the provided documentation. There is a lack of documentation indicating when the injured worker last underwent testing with a lipid panel. The results of any prior lipid panel testing were not provided. Given the lack of documentation pertaining to prior testing, the medical necessity of the testing cannot be established. As such, the request for lipid panel performed on 06/17/2013 is not medically necessary.

Albumin (Urine) Testing (performed on 06/17/2013): 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 Urine Protein, Lab Tests Online, Online database.

Decision rationale: The request for albumin (urine) testing performed on 06/17/2013 is not medically necessary. Lab tests online states a dipstick urine protein is used as a screening test,

whenever a urinalysis is performed. This may be performed as part of a routine physical, a pregnancy workup, when a urinary tract infection is suspected, as part of a hospital admission, or whenever the doctor wants to evaluate kidney function. It may also be performed when a previous test is positive for protein to see if the protein excretion persists. Within the provided documentation it is not indicated when the injured worker last underwent Albumin urine testing. The results of any prior urine Albumin testing are not provided in the medical records. The requesting physician's rationale for the request is not indicated. There is no documentation indicating the injured worker needed a kidney function assessment. As such, the request for albumin (urine) testing performed on 06/17/2013 is not medically necessary.

Amylase (performed on 06/17/2013): 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 Amylase, Lab Tests Online, Online database.

Decision rationale: The request for amylase performed on 06/17/2013 is not medically necessary. Lab tests online states a blood amylase test may be ordered when a person has symptoms of a pancreatic disorder, such as severe abdominal or back pain, fever, loss of appetite, and nausea. Per the provided documentation, there is no indication as to when the injured worker last underwent amylase testing. There is no indication that the injured worker has a possible pancreatic disorder. The injured worker did not report any severe abdominal pain, severe back pain, fever, loss of appetite, or nausea. The requesting physician's rationale for the request is not indicated. There is a lack of documentation indicating the medical necessity for the testing. As such, the request for amylase performed on 06/17/2013 is not medically necessary.

Hemoglobin (performed on 06/17/2013): 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 Hemoglobin, Lab Tests Online, Online database.

Decision rationale: The request for hemoglobin performed on 06/17/2013 is not medically necessary. Lab tests online states a hemoglobin test may be ordered by itself, with a hematocrit, or as a part of the complete blood count (CBC) during a general health examination. These tests may be performed for patients with signs and symptoms of a condition affecting red blood cells such as anemia or polycythemia. Hemoglobin testing may be performed several times or on a regular basis for patients diagnosed with ongoing bleeding problems or chronic anemia or polycythemia to determine the effectiveness of treatment. It may also be ordered routinely for patients undergoing treatment for cancer that is known to affect the bone marrow. There is a lack of documentation indicating the injured worker has signs and symptoms of a condition affecting red blood cells, such as anemia or polycythemia. There is a lack of documentation indicating

when the injured worker last underwent hemoglobin monitoring. The results of any prior hemoglobin monitoring are not provided. The requesting physician's rationale for the request is not indicated. There is a lack of documentation demonstrating the medical necessity for hemoglobin monitoring. As such, the request for hemoglobin performed on 06/17/2013 is not medically necessary.

Lipase (performed on 06/17/2013): 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 Lipase, Lab Tests Online, Online database.

Decision rationale: The request for lipase performed on 06/17/2013 is not medically necessary. Lab test online states a lipase test may be for patients with symptoms of acute pancreatitis or another pancreatic disorder, including severe abdominal or back pain, fever, loss of appetite, and nausea. It may also be performed at intervals in order to monitor patients with pancreatic conditions to evaluate the effectiveness of treatment and to determine whether the lipase levels are increasing or decreasing over time. There is a lack of documentation indicating when the injured worker last underwent lipase testing. There is a lack of documentation indicating the results of any prior lipase testing. Within the provided documentation, there is no evidence that the injured worker had any symptoms of acute pancreatitis or other pancreatic disorders. The injured worker did not have any severe abdominal or back pain, fever, loss of appetite, or nausea. The requesting physician's rationale for the request is not indicated. There is a lack of documentation demonstrating the medical necessity of the testing. As such, the request for lipase performed on 06/17/2013 is not medically necessary.

Thyroxine (total, performed on 06/17/2013): 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 T4, Lab Tests Online, Online database.

Decision rationale: The request for thyroxine (total) performed on 06/17/2013 is not medically necessary. Lab tests online states a total T4 or free T4 test is primarily performed in response to an abnormal TSH test result. Sometimes the T4 will be performed along with a TSH to give the physician a more complete evaluation of the adequacy of the thyroid hormone feedback system. These tests are usually performed when patients have symptoms of hyperthyroidism or hypothyroidism. Within the provided documentation it is not indicated when the injured worker last underwent thyroxine monitoring. The results of any prior thyroxine monitoring are not provided. There is no indication that the injured worker has a thyroid dysfunction for which medication is prescribed. There is no indication that the injured worker is suspected to have thyroid dysfunction. The requesting physician's rationale for the request is unclear. There is no

indication that the injured worker had abnormal TSH testing. There is a lack of documentation demonstrating the medical necessity of the testing. As such, the request for thyroxine (total) performed on 06/17/2013 is not medically necessary.

Thyroid Stimulating Hormone (TSH, performed on 06/17/2013): 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 TSH, Lab Tests Online, Online database.

Decision rationale: The request for thyroid-stimulating hormone (TSH) performed on 06/17/2013 is not medically necessary. Lab tests online states TSH testing may be performed when patients have symptoms of hyperthyroidism or hypothyroidism and/or when a person has an enlarged thyroid gland. TSH testing may also be performed at regular intervals in order to monitor the effectiveness of treatment when someone is being treated for a known thyroid disorder. Within the provided documentation it is not indicated when the injured worker last underwent thyroxine monitoring. The results of any prior thyroxine monitoring are not provided. There is no indication that the injured worker has a thyroid dysfunction for which medication is prescribed. There is no indication that the injured worker is suspected to have thyroid dysfunction. The requesting physician's rationale for the request is unclear. There is a lack of documentation demonstrating the medical necessity of the testing. As such, the request for thyroid-stimulating hormone (TSH) performed on 06/17/2013 is not medically necessary.

Thyroid Hormone (T3 or T4) Uptake or Thyroid Hormone Binding Ratio (THBR) (performed on 06/17/2013): 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 T4 & T3, Lab Tests Online, Online database.

Decision rationale: The request for thyroid hormone (T3 or T4) Uptake or thyroid hormone binding ratio (THBR) performed on 06/17/2013 is not medically necessary. Lab tests online states a total T4 or free T4 test is primarily performed in response to an abnormal TSH test result. Sometimes the T4 will be performed along with a TSH to give the physician a more complete evaluation of the adequacy of the thyroid hormone feedback system. These tests are usually performed when patients have symptoms of hyperthyroidism or hypothyroidism. Lab tests online states a total or free T3 test may be performed when patients have an abnormal TSH and/or T4 test result. It may be performed as part of the investigative workup when a person has symptoms suggesting hyperthyroidism. T3 tests may sometimes be performed at intervals to monitor a known thyroid condition and to help monitor the effectiveness of treatment for hyperthyroidism. Within the provided documentation it is not indicated when the injured worker last underwent thyroxine monitoring. The results of any prior thyroxine monitoring are not

provided. There is no indication that the injured worker has a thyroid dysfunction for which medication is prescribed. There is no indication that the injured worker is suspected to have thyroid dysfunction. The requesting physician's rationale for the request is unclear. There is no indication that the injured worker had abnormal TSH testing. There is a lack of documentation demonstrating the medical necessity of the testing. As such, the request for thyroid hormone (T3 or T4) Uptake or thyroid hormone binding ratio (THBR) performed on 06/17/2013 is not medically necessary.

Uric Acid (blood, performed on 06/17/2013): 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 Uric Acid, Lab Tests Online, Online database.

Decision rationale: The request for Uric acid (blood) performed on 06/17/2013 is not medically necessary. Lab test online states uric acid blood testing is performed when it is suspected that a patient has a high uric acid level. High levels of uric acid can indicate a patient has gout. This test is also performed to monitor cancer patients undergoing chemotherapy or radiation therapy, to ensure that uric acid levels do not get dangerously high. Per the provided documentation, the injured worker is diagnosed with hyperuricemia. There is a lack of documentation indicating when the injured worker last underwent blood uric acid testing. The results of any prior blood uric acid screenings are not provided within the medical records. The requesting physician's rationale for the request is not indicated. There is a lack of documentation indicating the medical necessity for blood uric acid testing. As such, the request for uric acid (blood) performed on 06/17/2013 is not medically necessary.

Antibody (Helicobacter Pylori, performed on 06/17/2013): 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 Uric Acid, Lab Tests Online, Online database.

Decision rationale: The request for antibody (helicobacter pylori) performed on 06/17/2013 is not medically necessary. Lab tests online states H. pylori testing may be performed to determine if there is evidence of this infection. Testing may be performed when a patient is experiencing gastrointestinal pain and symptoms of an ulcer including abdominal pain that comes and goes over time, weight loss, indigestion, a feeling of fullness or bloating, nausea, and belching. These tests may also be ordered following a regimen of prescribed antibiotics to confirm that the H. pylori bacteria have been eliminated; however, a follow-up test is not performed on every patient. The requesting physician's rationale for the request is not indicated within the documentation. The physician noted the injured worker was treated with NSAID medications, which caused increased gastric acid production that irritated the mucosal lining of her stomach.

The physician indicated the injured worker has gastro esophageal reflux disease, is prescribed Ranitidine, Gaviscon, and Dexilant. There is no indication that the injured worker had symptoms of an ulcer including abdominal pain, weight loss, a feeling of fullness or bloating, nausea, or belching. There is a lack of documentation indicating the medical necessity for the testing. As such, the request for antibody (helicobacter pylori) performed on 06/17/2013 is not medically necessary.

Complete Blood Count (CBC, performed on 06/17/2013): Upheld

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 NSAIDs, specific drug list & adverse effects Page(s): 70.

Decision rationale: The request for complete blood count (CBC) performed on 06/17/2013 is not medically necessary. The California MTUS guidelines note periodic lab monitoring of a CBC and chemistry profile (including liver and renal function tests) is recommended with the use of NSAIDs. Within the provided documentation, there is a lack of documentation indicating when the injured worker last underwent a complete blood count. There is a lack of documentation indicating the results of any prior complete blood counts. There is no documentation indicating the injured worker is prescribed NSAID medications. The requesting physician's rationale for the request is not indicated. There is a lack of documentation indicating the medical necessity of the testing. As such, the request for complete blood count (CBC) performed on 06/17/2013 is not medically necessary.

Urine Toxicology Screening: Upheld

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 Drug testing Page(s): 43.

Decision rationale: The request for urine toxicology screening is not medically necessary. The California MTUS guidelines note the use of urine drug screens is recommended as an option to assess for the use or the presence of illegal drugs. The guidelines also recommend the use of urine drug screening to ensure the patient is compliant with their full medication regimen. Per the provided documentation, the injured worker underwent a urine drug screen on 03/14/2013, which was remarkable for bupropion metabolite, hydroxybupropion, venlafaxine metabolite, O-desmethylvenlafaxine, and venlafaxine. The injured worker underwent a urine drug screening on 05/08/2013 which was positive for tramadol. Per the urine drug screening report, the results were consistent with the injured worker's medication regimen. There is a lack of documentation indicating the injured worker displayed any aberrant behavior for which a urine drug screen would be indicated. There was no evidence of medication misuse within the provided documentation and the urine drug screen prior to the requested date appeared to be congruent

with the injured worker's medication regimen. The requesting physician's rationale for the request is not indicated. There is a lack of documentation indicating the medical necessity for a urine drug screen. As such, the request for urine toxicology screening is not medically necessary.