

<b>Case Number:</b>	CM13-0059154		
<b>Date Assigned:</b>	03/21/2014	<b>Date of Injury:</b>	03/06/2009
<b>Decision Date:</b>	08/29/2014	<b>UR Denial Date:</b>	11/15/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	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 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 67-year-old male who reported injury on 03/06/2009. The documentation of 08/21/2013 revealed the injured worker had hypertension and gastrointestinal issues. The documentation indicated the injured worker had physical therapy treatment. The documentation indicated the injured worker began to experience abdominal pain, vomiting, acid reflux, heartburn, diarrhea, and constipation in 2010. The injured worker's medications included Tylenol No. 3, Lisinopril 20 mg, and Aspirin 80 mg. The injured worker's blood pressure was 126/80. The injured worker's cardiac evaluation was noted to include regular rate and rhythm with S1 and S2 and there were no gallops or rubs appreciated. The injured worker had no elevation in jugular venous pressures in the neck. There were 2+ carotid upstrokes. There were no systolic or diastolic bruits. There was no lymphedema or thyromegaly. The diagnoses included hypertension, chest pain rule out cardiac versus GI versus anxiety, abdominal pain, constipation, diarrhea rule out irritable bowel syndrome, gastroesophageal reflux secondary to NSAIDs and sleep disorder rule out obstructive sleep apnea. The documentation indicated in the discussion portion that the injured worker's blood pressure was 126/80 mm of mercury with a pulse of 79 beats per minute without medication. The physician documented he did not have enough clinical evidence to confirm industrial aggravation of the injured worker's hypertension that was reportedly diagnosed in 1998. However, the physician documented he will continue to monitor the injured worker's condition on future visits. In the meantime, the request was made for ordered laboratory studies, an EKG, an ICG, a stress echo, and a 2D echo Doppler with further evaluation and a blood pressure monitor.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Echocardiography, Transthoracic, Real-Time with Image Documentation (2d), Includes M-Mode Recording, When Performed, Complete, Without Spectral or Color Doppler**  
**Echocardiography: Upheld**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation The National Institutes of Health.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: <http://www.mayoclinic.org/tests-procedures/echocardiogram/basics/why-its-done/prc-20013918>.

**Decision rationale:** Per the mayoclinic.org an echocardiogram is appropriate if there is a suspicion the injured worker was having problems with the valves or chambers of their heart or the heart's inability to pump. The clinical documentation submitted for review indicated the injured worker had an essentially normal examination. There was documentation of a normal sinus rhythm in the physical examination. There were no systolic or diastolic bruits noted. There were no rubs or gallops appreciated. The injured worker had regular rate and rhythm in S1 and S2 and his blood pressure was 126/80. Given the above, the request for echocardiography, transthoracic, real time with image documentation (2D), includes m-mode recording, when performed, complete, without spectral or color doppler echocardiography is not medically necessary.