

Case Number:	CM13-0061895		
Date Assigned:	12/30/2013	Date of Injury:	11/05/2007
Decision Date:	05/22/2014	UR Denial Date:	11/25/2013
Priority:	Standard	Application Received:	12/05/2013

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 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 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 61 year old male who was injured on 11/05/2007. The mechanism of injury is unknown. PR2 dated 02/12/2013 indicated the patient presented with no new complaints. He stated he felt good. His blood pressure at home was 140/80-140/90 which was borderline high. On exam, his blood pressure was rechecked which was 130/86. The patient was also noted to have sinus bradycardia with a heart rate of 44. Diagnostic tests included EKG, echocardiogram, "blood tests," and urine microalbumin. The plan was for patient to follow up with PCP for evaluation of sinus bradycardia. He was also to start Ramipril and Viagra prn (as needed). Diagnostic studies reviewed include M-Mode, 2-D, Doppler Echocardiography report dated 02/12/2013 which demonstrated an ejection fraction of 60%. The left ventricular chamber dimensions were normal with normal systolic function and wall motion pattern. The left atrium, right atrium, right ventricle, and aorta were normal; aortic valve, mitral valve, and tricuspid valve were normal. There was no pericardial effusion and Doppler revealed trace mitral regurgitation, trace tricuspid regurgitation and trace aortic insufficiency.

IMR ISSUES, DECISIONS AND RATIONALES

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

CBC: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation NIH Medline Plus Website - <http://www.nlm.nih.gov/medlineplus/ency/article/003642.htm>.

Decision rationale: The California MTUS guidelines and the ODG guidelines do not address the issue of the dispute. CBC is recommended to detect or monitor many different health conditions. It may be used to: Diagnose infections or allergies, detect blood disorders, including anemia, evaluate red blood cell production or destruction. The medical records document the employee was diagnosed with essential hypertension; last CBC test was dated 2/12/2013 and revealed the result within normal limits. In the absence of documented clear indication of requesting CBC test such as recent infection or allergy, suspicion of anemia, or any other blood disorder, the request is not medically necessary according to the guidelines.

LIPID PANEL: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation NEW CHOLESTEROL GUIDELINES ABANDON LDL TARGETS - MICHAEL O'RIORDAN, NOVEMBER 14, 2013, <http://www.medscape.com/viewarticle/814152#1>.

Decision rationale: The California MTUS guidelines and ODG guidelines do not address the issue of the dispute. Lipid panel is recommended for the detection, evaluation, and treatment of elevated cholesterol. The medical records document the employee was diagnosed with essential hypertension; last lipid panel test was dated 2/12/2013 and revealed Final Determination Letter for IMR Case Number [REDACTED] normal cholesterol levels. Patients with more aggressive lipid targets include those with coronary artery disease (or its equivalent), diabetes, or multiple risk factors including age, hypertension, hyperlipidemia, smoking, and family history. The records document that the employee has hypertension; otherwise, there are no other cardiac risk factors that are known or provided. The employee's cholesterol would be considered to be at goal and within normal limits. In the absence of documented clear indication of requesting lipid panel test, the fact that the employee is not taking any medication to lower the cholesterol, and all of the aforementioned reasons, the request for lipid panel is not medically necessary.

T3 TOTAL: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation THYROID FUNCTION TESTS: DIAGNOSES AND MONITORING OF THYROID FUNCTION DISORDERS IN ADULTS, US DEPARTMENT OF HEALTH & HUMAN SERVICES WEBSITE: <http://www.guideline.gov/content.aspx?id=38907>.

Decision rationale: The California MTUS guidelines and ODG guidelines do not address the issue of the dispute. Routine thyroid function testing (TFT) is not recommended in asymptomatic adults. However, testing may be indicated when non-specific signs and symptoms are present in patients at risk for thyroid disease. The medical records document the employee was diagnosed with essential hypertension; last TFT test was dated 2/12/2013 and revealed the result within normal limits. There is no documented clear indication for requesting TFT's which include risk factors of thyroid disease, signs and symptoms of either hyperthyroidism or hypothyroidism, or using thyroid replacement therapy. Therefore, the request is not medically necessary according to the guidelines.

T4 (THYROXINE TOTAL): Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation THYROID FUNCTION TESTS: DIAGNOSES AND MONITORING OF THYROID FUNCTION DISORDERS IN ADULTS, US DEPARTMENT OF HEALTH & HUMAN SERVICES WEBSITE:
<http://www.guideline.gov/content.aspx?id=38907>.

Decision rationale: The California MTUS guidelines and ODG guidelines do not address the issue of the dispute. Routine thyroid function testing (TFT) is not recommended in asymptomatic adults. However, testing may be indicated when non-specific signs and symptoms are present in patients at risk for thyroid disease. The medical records document the employee was diagnosed with essential hypertension; last TFT test was dated 2/12/2013 and revealed the result within normal limits. There is no documented clear indication for requesting TFT such as risk factors of thyroid disease, signs and symptoms of either hyperthyroidism or hypothyroidism, or using thyroid replacement therapy. Therefore, the request is not medically necessary according to the guidelines.

T3 UPTAKE (TRIIODOTHYRONINE): Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation THYROID FUNCTION TESTS: DIAGNOSES AND MONITORING OF THYROID FUNCTION DISORDERS IN ADULTS, US DEPARTMENT OF HEALTH & HUMAN SERVICES WEBSITE:
<http://www.guideline.gov/content.aspx?id=38907>.

Decision rationale: The California MTUS guidelines and ODG guidelines do not address the issue of the dispute. Routine thyroid function testing (TFT) is not recommended in asymptomatic adults. However, testing may be indicated when non-specific signs and symptoms are present in

patients at risk for thyroid disease. The medical records document the employee was diagnosed with essential hypertension; last TFT test was dated 2/12/2013 and revealed the result within normal limits. There is no documented clear indication for requesting TFT such as risk factors of thyroid disease, signs and symptoms of either hyperthyroidism or hypothyroidism, or using thyroid replacement therapy. Therefore, the request is not medically necessary according to the guidelines.

THYROXINE FREE: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation THYROID FUNCTION TESTS: DIAGNOSES AND MONITORING OF THYROID FUNCTION DISORDERS IN ADULTS, US DEPARTMENT OF HEALTH & HUMAN SERVICES WEBSITE:
<http://www.guideline.gov/content.aspx?id=38907>.

Decision rationale: The California MTUS guidelines and ODG guidelines do not address the issue of the dispute. Routine thyroid function testing (TFT) is not recommended in asymptomatic adults. However, testing may be indicated when non-specific signs and symptoms are present in patients at risk for thyroid disease. The medical records document the employee was diagnosed with essential hypertension; last TFT test was dated 2/12/2013 and revealed the result within normal limits. There is no documented clear indication for requesting TFT such as risk factors of thyroid disease, signs and symptoms of either hyperthyroidism or hypothyroidism, or using thyroid replacement therapy. Therefore, the request is not medically necessary according to the guidelines.

T3 FREE: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation THYROID FUNCTION TESTS: DIAGNOSES AND MONITORING OF THYROID FUNCTION DISORDERS IN ADULTS, US DEPARTMENT OF HEALTH & HUMAN SERVICES WEBSITE:
<http://www.guideline.gov/content.aspx?id=38907>.

Decision rationale: The California MTUS guidelines and ODG guidelines do not address the issue of the dispute. Routine thyroid function testing (TFT) is not recommended in asymptomatic adults. However, testing may be indicated when non-specific signs and symptoms are present in patients at risk for thyroid disease. The medical records document the employee was diagnosed with essential hypertension; last TFT test was dated 2/12/2013 and revealed the result within normal limits. There is no documented clear indication for requesting TFT such as risk factors of thyroid disease, signs and symptoms of either hyperthyroidism or hypothyroidism, or using

thyroid replacement therapy. Therefore, the request is not medically necessary according to the guidelines.

TSH (THYROID STIMULATING HORMONE): Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation THYROID FUNCTION TESTS: DIAGNOSES AND MONITORING OF THYROID FUNCTION DISORDERS IN ADULTS, US DEPARTMENT OF HEALTH & HUMAN SERVICES WEBSITE: <http://www.guideline.gov/content.aspx?id=38907>.

Decision rationale: The California MTUS guidelines and ODG guidelines do not address the issue of the dispute. Routine thyroid function testing (TFT) is not recommended in asymptomatic adults. However, testing may be indicated when non-specific signs and symptoms are present in patients at risk for thyroid disease. The medical records document the employee was diagnosed with essential hypertension; last TFT test was dated 2/12/2013 and revealed the result within normal limits. There is no documented clear indication for requesting TFT such as risk factors of thyroid disease, signs and symptoms of either hyperthyroidism or hypothyroidism, or using thyroid replacement therapy. Therefore, the request is not medically necessary according to the guidelines.

BASIC METABOLIC PANEL: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Citation: U.S. NATIONAL LIBRARY OF MEDICINE - <http://www.nlm.nih.gov/medlineplus/ency/article/003462.htm>.

Decision rationale: The California MTUS guidelines and ODG guidelines do not address the issue of the dispute. Basic metabolic panel is a group of blood tests that provides information about the body's metabolism. This test is recommended to evaluate: Kidney function, Blood acid/base balance, and Blood sugar levels. The medical records document the employee was diagnosed with essential hypertension and started on the medication Ramipril on 2/12/13; last basic metabolic panel test was dated 2/12/2013 and revealed the result within normal limits. Ramipril can produce hyperkalemia and elevation in creatinine, and should be monitored with a basic metabolic panel at baseline, then subsequent periodic monitoring of basic metabolic panels. Furthermore, patients with hypertension should have at least annual monitoring with a basic metabolic panel to evaluate kidney function. Thus, the request for basic metabolic panel is medically necessary.

HEPATIC FUNCTIONAL PANEL: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Citation: U.S. NATIONAL LIBRARY OF MEDICINE - <http://www.ncbi.nlm.nih.gov/pubmedhealth/PMH0003909/>.

Decision rationale: The California MTUS guidelines and ODG guidelines do not address the issue of the dispute. LFTs (liver function tests) are a group of blood tests that provides information about the liver function. The medical records document the employee was diagnosed with essential hypertension; last LFT was dated 2/12/2013 and revealed the result within normal limits. In the absence of documented clear indication of requesting LFT, further, there is no documentation of prior liver disease or right-sided heart failure, therefore, the request is not medically necessary according to the guidelines.

URIC ACID: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation U.S. NATIONAL LIBRARY OF MEDICINE - <http://www.nlm.nih.gov/medlineplus/ency/article/003476.htm>.

Decision rationale: The California MTUS guidelines and ODG guidelines do not address the issue of the dispute. Uric acid levels are primarily checked in patients suspicious of having gout, or hyperuricemia from certain medications and/or conditions such as kidney disease and tumor lysis syndrome. The medical records document the employee was diagnosed with essential hypertension; last uric acid test was dated 2/12/2013 and revealed the result within normal limits. In the absence of documented clear indication of requesting uric acid, as the records do not document that the employee has gout or renal disease, the request is not medically necessary according to the guidelines.

GGTP: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation U.S. NATIONAL LIBRARY OF MEDICINE - <http://www.ncbi.nlm.nih.gov/pubmedhealth/PMH0003909/>.

Decision rationale: The California MTUS guidelines and ODG guidelines do not address the issue of the dispute. LFTs are group of blood tests that provides information about the liver function. GGT is typically ordered to confirm that an elevated alkaline phosphatase is originating

from the liver. The medical records document the employee was diagnosed with essential hypertension; last LFT was dated 2/12/2013 and revealed the result within normal limits. In the absence of documented clear indication of requesting LFT, further, there is no documentation of prior chronic liver hepatitis infection; therefore, the request is not medically necessary according to the guidelines.

SERUM FERRITIN: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation U.S. NATIONAL LIBRARY OF MEDICINE - <http://www.nlm.nih.gov/medlineplus/article/003490.htm>.

Decision rationale: The California MTUS guidelines and ODG guidelines do not address the issue of the dispute. Serum ferritin level is directly related to the amount of iron stored in your body. The medical records document the employee was diagnosed with essential hypertension; last serum ferritin level was dated 2/12/2013 and revealed the result within normal limits. In the absence of documented clear indication of requesting serum ferritin level, further, there is no documentation of anemia in the prior CBC; therefore, the request is not medically necessary according to the guidelines.

VITAMIN D HYDROXY: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation U.S. NATIONAL LIBRARY OF MEDICINE - <http://www.nlm.nih.gov/medlineplus/ency/article/003490.htm>.

Decision rationale: The California MTUS guidelines and ODG guidelines do not address the issue of the dispute. 25-hydroxy vitamin D test is a test to measure the amount of vitamin D in the body. Vitamin D levels are measured in the elderly who frequently fall, in those with vitamin D deficiency, those undergoing treatment for vitamin D deficiency, and patients with osteoporosis. The medical records document the last Vitamin D level was tested 2/12/2013 and revealed the result was low at 28.7. However, there are no documents submitted supporting treatment has been given for this condition; therefore, the request is not medically necessary according to the guidelines.

GLYCO HEMOGLOBIN A1C: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation U.S. NATIONAL LIBRARY OF MEDICINE - <http://www.nlm.nih.gov/medlineplus/ency/article/003490.htm>.

Decision rationale: The California MTUS guidelines and ODG guidelines do not address the issue of the dispute. HbA1c is a lab test which shows the average level of blood sugar (glucose) over the previous 3 months, thus illustrating the patient's diabetes control. The medical records document the employee was diagnosed with essential hypertension; last HbA1c level was dated 2/12/2013 and revealed the result was within normal level. The patient also had normal glucose in his basic metabolic panel. He carries no diagnosis of diabetes. In the absence of documented clear indication for this test such as diabetes mellitus, the request is not medically necessary according to the guidelines.