

Case Number:	CM13-0065310		
Date Assigned:	04/28/2014	Date of Injury:	01/29/2009
Decision Date:	10/29/2014	UR Denial Date:	11/27/2013
Priority:	Standard	Application Received:	12/13/2013

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 Physical Medicine and Rehabilitation, has a subspecialty in Pain 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's original industrial injury was on January 29, 2009. The injured worker has diagnoses of chronic abdominal pain, and history of gastric bypass, hypertension, right atrial enlargement, chronic knee pain, and psoriasis. The disputed request is for impedance plethysmography.

IMR ISSUES, DECISIONS AND RATIONALES

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

HEMODYNAMIC STUDY / IPG: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES

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: Uptodate Online, Impedance Plethysmography

Decision rationale: According to an online evidenced based database, "Impedance plethysmography requires the patient to lie still while a thigh cuff is inflated. The change in blood volume at the calf is measured from the impedance of the calf as determined by electrodes wrapped around it. After rapid deflation of the cuff, the proportional change of impedance over the subsequent three seconds is used to measure venous outflow obstruction in a manner similar

to spirometer. At present, however, many facilities have neither the equipment nor skilled personnel to perform impedance plethysmography, while the availability of ultrasonography is more widespread."After a review of all the submitted documentation, there is no progress note that clearly identifies the rationale for this request. Given the lack of documentation, this request is not medically necessary.