

<b>Case Number:</b>	CM13-0067333		
<b>Date Assigned:</b>	01/03/2014	<b>Date of Injury:</b>	01/21/2011
<b>Decision Date:</b>	05/13/2014	<b>UR Denial Date:</b>	12/09/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	12/17/2013

### 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 Medicine, and is licensed to practice in Utah. 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 patient is a 60 year old male. His date of injury is Jan 21, 2011. The mechanism of injury was moving a heavy object that moved unexpectedly, leaving him unconscious. The patient has been diagnosed with GERD, blunt abdominal trauma, hypertension, and cervical disc disease. The patient's treatments have included physical treatments, medications, and imaging studies. The physical exam findings show the patient in moderated distress. He has tenderness to palpation of the cervical neck, and decreased range of motion with general weakness in the upper extremities. Medications include, but are not limited to Losartan and Atenolol. Outcomes included controlled blood pressures per clinical documents.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**ATENOLOL 25MG:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Drugs.com.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation UpToDate.com

**Decision rationale:** Treatment guidelines were reviewed in regards to this specific case, and the clinical documents were reviewed. The request is for Atenolol 25mg. There is a lack of

instruction for the duration of this medication. While this medication is indicated for the diagnosis as stated above the request, as it stands, without a number of pills or amount of time the medications should be used, is not a medical necessity.

**ECHOCARDIOGRAM:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Zipes: Braunwald's Heart Disease: A Textbook of Cardiovascular Medicine, 7th ed., page 261.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation UpToDate.com.

**Decision rationale:** Uptodate.com treatment guidelines were reviewed in regards to this specific case, and the clinical documents were reviewed. The request is for echocardiogram. Current UpToDate guidelines state that stress testing is a common procedure, most often performed to estimate the likelihood of obstructive coronary artery in patients who present with risk factors, or to estimate the ischemic burden and prognosis in a patient who has been diagnosed with this condition. Other indications include dyspnea of possible cardiac origin, pulmonary hypertension, mitral stenosis, mitral regurgitation, aortic stenosis, low gradient aortic stenosis, asymptomatic aortic stenosis, and hypertrophic cardiomyopathy. According to the clinical documentation for review, this patient does not present with any of the indications for this procedure. As such, echocardiogram is not a medical necessity.