

Case Number:	CM14-0103753		
Date Assigned:	07/30/2014	Date of Injury:	09/18/1999
Decision Date:	12/24/2014	UR Denial Date:	06/16/2014
Priority:	Standard	Application Received:	07/07/2014

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 & 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:

This is a patient with a date of injury of June 26, 2003. A utilization review determination dated June 16, 2014 recommends certification of random urine drug screening and noncertification of a comprehensive metabolic panel. Noncertification of CMP was recommended due to no documentation of the date and results of prior lab studies. A consultation dated July 9, 2014 indicates that the patient was referred for examination and laboratory testing for potential side effects of medication toxicity. The note goes on to state the tests will include liver functions, renal functions, ESR, and a complete blood count to rule out anemia. Current complaints include bilateral shoulder pain. No significant past medical history is listed other than hyperlipidemia and abnormal blood sugar. Review of systems is negative. Physical examination findings are normal. The note indicates a laboratory testing has been obtained including a chemistry panel and complete blood count. A comprehensive metabolic panel was also normal. Diagnoses include bilateral shoulder injury, extended long-term use of pain medications and anti-inflammatories, hyperlipidemia, and abnormal blood sugar. The note indicates that the patient uses Tramadol. The treatment plan recommends follow-up with a primary care physician with periodic monitoring and screening for systemic complications. A progress report dated June 2, 2014 indicates that the patient is taking Tramadol.

IMR ISSUES, DECISIONS AND RATIONALES

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

Comprehensive Metabolic Panel: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines
Page(s): 76-78 an 94.

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: Comprehensive Metabolic Panel
(<http://labtestsonline.org/understanding/analytes/cmp/tab/test>)

Decision rationale: Regarding the request for CMP, California MTUS and ODG do not address the issue. A CMP is ordered as a broad screening tool to evaluate organ function and check for conditions such as diabetes, liver disease, and kidney disease. The CMP may also be ordered to monitor known conditions, such as hypertension, and to monitor people taking specific medications for any kidney- or liver-related side effects. Within the documentation available for review, the requesting physician has indicated that the patient has some comorbid medical conditions including abnormal blood sugar and hyperlipidemia. Additionally, the patient is taking narcotic pain medication on a regular basis. Therefore, performing a CMP is a reasonable screening test to do on a periodic basis to evaluate for any complications from the medications being prescribed or determine if the patient's comorbid medical conditions have impacted his kidneys or liver, such that dose adjustments may be needed. As such, the currently requested CMP is medically necessary.