

<b>Case Number:</b>	CM14-0139068		
<b>Date Assigned:</b>	09/05/2014	<b>Date of Injury:</b>	05/25/2010
<b>Decision Date:</b>	11/04/2014	<b>UR Denial Date:</b>	07/31/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/27/2014

### 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 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 (IW) is a 44 year-old woman who stepped in a water bottle in the park of her employer, causing her to slip and fall, landing directly on her left knee. The knee was swollen, scratched, and bruised. Initially, she was thought to have an infection and was given antibiotics. Dated of injury was May 25, 2010. Current diagnoses are generalized osteoarthritis, metabolic syndrome, low back pain, and morbid obesity. Previous conservative treatment includes PT and anti-inflammatory medication. She was seen July 15, 2014, which revealed normal findings. It was noted that the IW weighed 241 pounds and was waiting for gastric sleeve surgery. She was seen by a neurologist for decreased sensation, and was told she had a pinched nerve. She was then sent to pain management, but it did not help. In February 2012, her left knee gave out causing her to fall on the right knee. She was seen in the ER and was told that her right knee injury was not serious. Physical examination of the left knee reveals positive patellofemoral crepitus with active flexion and extension of the knee. No significant medial or lateral ligamentous laxity. Negative Lachman. Negative anterior drawer. There is posteromedial joint line tenderness increased with McMurray's, Apley grind and bounce home. Right knee reveals the exact examination. X-ray (standing bilateral AP, lateral, notch and patella views) dated February 13, 2014 show preservation of the joint spaces bilaterally. There is lateral tracking of the patella. MRI of the left knee dated March 5, 2013 shows some degenerative changes in the lateral compartment involving the trochlea, but no meniscal pathology or ligamentous pathology is identified. The IW states that she has had a more recent MRI of the left knee that does show damage. The anticipated plan is to proceed with left knee arthroscopy as soon as her case is clearer. She is moving forward with gastric sleeve surgery for weight loss prior to the knee surgery.

## IMR ISSUES, DECISIONS AND RATIONALES

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

### **1 Peroxidase Antibody Test: Upheld**

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**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: Thyroid Peroxidase Test: What Is It? <http://www.mayoclinic.org/thyroid-disease/expert-answers/faq-20058114>

**Decision rationale:** The California MTUS guidelines, the ACOEM practice guidelines, and the ODG do not specifically address the peroxidase antibody test. An article provided by the Mayo Clinic provides peer review evidence-based guidelines as to when the peroxidase antibody test is to be used. Thyroid antibody testing is primarily ordered to help diagnose autoimmune thyroid disease and to distinguish it from other forms of thyroid dysfunction. It may be ordered to investigate and goiter or other signs and symptoms associated with a high or low thyroid level. Testing may be ordered especially if the cause is suspected to be autoimmune disease. In this case, the injured worker presented with diagnosis of low back pain, generalized osteoarthritis, metabolic syndrome and morbid obesity. There is no indication of an abnormal thyroid on physical examination or historically. Based on the clinical information in the medical record evidence-based, peer reviewed guidelines the peroxidase antibody test is not medically necessary.

### **1 Random Insulin Test: Upheld**

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**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: INSULIN TESTING <http://labtestsonline.org/understanding/analytes/insulin/tab/test/>

**Decision rationale:** The California MTUS guidelines, the ACOEM practice guidelines and the Official Disability Guidelines do not specifically address insulin testing. The American Association of Clinical Chemistry enumerates the indication for Insulin testing. Insulin testing has several possible uses. Insulin is a hormone that transports glucose, the body's main source of energy, from blood into the cells. Insulin levels are most frequently ordered following a low glucose and/or chronic symptoms of low blood coasts caused by example by an insulinoma. In this case, the injured worker present with a diagnosis of low back pain, generalized osteoarthritis, metabolic syndrome, and morbid obesity. There was no documentation that referenced low blood sugars, symptoms of low blood sugar or history of diabetes. Based on the clinical information in the medical record in the evidence-based peer review article the insulin test is not medically necessary.

