

Case Number:	CM14-0161890		
Date Assigned:	10/07/2014	Date of Injury:	11/08/2012
Decision Date:	11/10/2014	UR Denial Date:	09/19/2014
Priority:	Standard	Application Received:	10/02/2014

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 Occupational 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 applicant is a represented [REDACTED] employee who has filed a claim for chronic shoulder, wrist, hand, and knee pain reportedly associated with cumulative trauma at work between the dates April 3, 1997 through November 8, 2012. Thus far, the applicant has been treated with the following: Analgesic medications, knee bracing; a shoulder corticosteroid injection; topical agents; and extensive periods of time off of work. In a Utilization Review Report dated September 19, 2014, the claims administrator retrospectively denied a mechanical compression device and sleeves for venous thromboembolism prophylaxis. It appeared, based on the Utilization Review description of events, that the denial represented denial of a postoperative mechanical prophylaxis device furnished on the date the applicant underwent a left shoulder arthroscopy several months prior, on June 2, 2014. The applicant's attorney subsequently appealed. In a September 22, 2014 progress note, the applicant reported persistent complaints of shoulder pain, knee pain, wrist pain, and hand pain. The applicant was not working, it was acknowledged. The note was very difficult to follow and mingled old complaints with current complaints. The applicant was obese, standing 5 feet 5 inches tall and weighing 213 pounds. The applicant was asked to remain off of work, on total temporary disability, and follow up in six weeks' time. The applicant's past medical history was not clearly reported. The applicant's medication list did, however, include aspirin, Zestril, metformin, Tylenol with Codeine, Duexis, Norco, Keflex, Celebrex, and Voltaren. It is not clear when the applicant's medication list was last updated, although it did appear that the applicant was diabetic.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective request for Mechanical compression Device and sleeves for VTE

Prophylaxis: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines-(ODG)-Shoulder (updated 08/27/2014) Venous thrombosis-Compression Garments

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: <http://www.ncbi.nlm.nih.gov/pubmed/20377851>

Decision rationale: The MTUS does not address the topic. As noted in a review article entitled Deep Venous Thromboembolism After Arthroscopy of the Shoulder, DVT has an incidence of 1 case per 1000 inhabitants in the general population and is very rare in applicants undergoing shoulder arthroscopy, as apparently transpired here. Current guidelines, thus, do not advise the administration of DVT prophylaxis in shoulder arthroscopy procedures. In this case, the attending provider did not furnish any evidence of applicant-specific risk factors such as prior DVT, prior PE, prolonged surgical procedure, etc., which would offset the unfavorable guideline position on the article at issue. Therefore, the request is not medically necessary.