

Case Number:	CM14-0169991		
Date Assigned:	10/20/2014	Date of Injury:	12/27/2012
Decision Date:	11/20/2014	UR Denial Date:	09/17/2014
Priority:	Standard	Application Received:	10/15/2014

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 Family Medicine, and is licensed to practice in Arizona. 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:

Patient is a 47 year old female with a date of injury on 12/27/2012. Subjective complaints are of no changes in Chest Pain, Hypertension, and Dyspnea. Physical exam shows lungs are clear to auscultation, heart with regular rate and rhythm, and blood pressure at 104/74. Diagnoses include status post myocardial infarction, hypertension, angina, palpitations, and dyspnea on exertion. Request is for consultation with an ophthalmologist. Submitted documentation does not include subjective eye complaints, objective findings, or rationale for eye consultation.

IMR ISSUES, DECISIONS AND RATIONALES

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

Follow-up Ophthalmologist: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM): Occupational Medicine Practice Guidelines, 2nd Edition, 2004, Chapter 7, page 127 regarding Independent Medical Examinations and Consultations.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) CHAPTER 7, page(s) 127 and the Official Disability Guidelines (ODG) PAIN, OFFICE VISITS

Decision rationale: ACOEM guidelines indicated that consultation can be obtained to aid in diagnosis, prognosis, therapeutic management, and determination of medical stability. The ODG recommends office visits are determined to be medically necessary. Evaluation and management (E&M) outpatient visits to the offices of medical doctors play a critical role in the proper diagnosis and return to function of an injured worker, and they should be encouraged. For this patient, submitted documentation does not identify uncontrolled hypertension or visual complaints that would warrant an ophthalmologist follow-up. Therefore, the medical necessity for an Ophthalmologist follow-up is not a medical necessity at this time.