

Case Number:	CM14-0173959		
Date Assigned:	10/27/2014	Date of Injury:	07/19/2012
Decision Date:	12/15/2014	UR Denial Date:	10/01/2014
Priority:	Standard	Application Received:	10/22/2014

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 Preventive 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:

According to the records made available for review, this is a 61-year-old male with a 7/19/12 date of injury. At the time (9/23/14) of request for authorization for CBC/chemical panel (PTT and platelet count) for clearance before CT myelogram, there is documentation of subjective (bilateral elbow pain with weakness and numbness/tingling over right wrist) and objective (decreased cervical as well as right wrist range of motion) findings, current diagnoses (cervical spine pain with bilateral upper extremity radiculopathy, multilevel degenerative disc disease, lumbar spine pain with bilateral lower extremity radiculopathy, and bilateral knee pain), and treatment to date (medications). There is no documentation of a pending CT myelogram that is authorized/certified.

IMR ISSUES, DECISIONS AND RATIONALES

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

CBC/chemical panel (PTT and platelet count) for clearance before CT myelogram: 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 Medical Necessity of Laboratory Tests (http://www.healthcarecompliance.info/med_nec.htm)

Decision rationale: MTUS and ODG do not address the issue. Medical Treatment Guideline necessitate documentation of a clearly stated rationale identifying why laboratory tests are needed, as criteria necessary to support the medical necessity of blood tests. Within the medical information available for review, there is documentation of diagnoses of cervical spine pain with bilateral upper extremity radiculopathy, multilevel degenerative disc disease, lumbar spine pain with bilateral lower extremity radiculopathy, and bilateral knee pain. However, despite documentation of a request for CBC/chemical panel (PTT and platelet count) for clearance before CT myelogram, there is no documentation of a pending CT myelogram that has been authorized/certified. Therefore, based on guidelines and a review of the evidence, the request for CBC/chemical panel (PTT and platelet count) for clearance before CT myelogram is not medically necessary.