

<b>Case Number:</b>	CM14-0022200		
<b>Date Assigned:</b>	05/09/2014	<b>Date of Injury:</b>	07/22/2009
<b>Decision Date:</b>	07/10/2014	<b>UR Denial Date:</b>	01/23/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	02/21/2014

### 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 New Jersey. 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 worker is a 33 year old male who was injured on 7/22/09. He was later diagnosed with lumbar degenerative disc disease with radiculitis, myofascial pain, and sacroiliac strain. Treatment for his chronic back pain included topical analgesics, exercises, surgery (10/11), physical therapy, epidural injection acupuncture/acupressure and myofascial release. The worker was seen by his treating physician on 1/10/14 complaining of low back pain with a 2/10 severity rating, but reported that exercises help. He reported using Ketoprofen as needed and that Omeprazole was helping his heartburn. No other side effects were reported. His paraspinal muscles were tender on the left and exhibited numbness in his left leg with walking on his heel. Nothing else was remarkable on examination. The worker was then recommended he continue using Flector patches, Menthoderm, Ketoprofen as needed, and Omeprazole twice daily. Also, an order for a complete blood count, comprehensive metabolic panel, stool guaiac X 3, and H. pylori breath tests were ordered for "medication monitoring."

### IMR ISSUES, DECISIONS AND RATIONALES

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

**CBC (COMPLETE BLOOD COUNT):** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Drug Testing Page(s): 43.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Pain Section, NSAIDS, GI Symptoms & Cardiovascular Risk, H. Pylori and NSAID Use.

**Decision rationale:** The California MTUS Guidelines do not specifically address testing for medication monitoring outside of urine drug testing for chronic opioid users. The ODG also does not recommend any testing for patients using NSAIDs or PPIs as in the case of this worker. The ODG mentions that H. pylori screening is not indicated in patients who are about to start NSAIDs or who are already taking NSAIDs. CBC, CMP, and stool guaiac testing was not addressed in the California MTUS or ODG, nor are they mentioned as part of monitoring for PPIs or NSAIDs. The worker in this case was using an NSAID and a PPI, and no other medications that the worker may have been taking were noted in the documents provided. The treating physician did not make it clear in their documentation of the encounter on 1/10/14 as to the reasoning for monitoring in order for the reviewer to consider an exception in this case. Therefore, the CBC, CMP, H. Pylori breath test, and stool guaiac x 3 are each not medically necessary.

**CMP (COMPLETE METABOLIC PANEL):** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Drug Testing Page(s): 43.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Pain Section, NSAIDS, GI Symptoms & Cardiovascular Risk, H. Pylori and NSAID Use.

**Decision rationale:** The California MTUS Guidelines do not specifically address testing for medication monitoring outside of urine drug testing for chronic opioid users. The ODG also does not recommend any testing for patients using NSAIDs or PPIs as in the case of this worker. The ODG mentions that H. pylori screening is not indicated in patients who are about to start NSAIDs or who are already taking NSAIDs. CBC, CMP, and stool guaiac testing was not addressed in the California MTUS or ODG, nor are they mentioned as part of monitoring for PPIs or NSAIDs. The worker in this case was using an NSAID and a PPI, and no other medications that the worker may have been taking were noted in the documents provided. The treating physician did not make it clear in their documentation of the encounter on 1/10/14 as to the reasoning for monitoring in order for the reviewer to consider an exception in this case. Therefore, the CBC, CMP, H. Pylori breath test, and stool guaiac x 3 are each not medically necessary.

**PYLORI BREATH TEST:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Drug Testing Page(s): 43.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Pain Section, NSAIDS, GI Symptoms & Cardiovascular Risk, H. Pylori and NSAID Use.

**Decision rationale:** The California MTUS Guidelines do not specifically address testing for medication monitoring outside of urine drug testing for chronic opioid users. The ODG also does not recommend any testing for patients using NSAIDs or PPIs as in the case of this worker. The ODG mentions that H. pylori screening is not indicated in patients who are about to start NSAIDs or who are already taking NSAIDs. CBC, CMP, and stool guaiac testing was not addressed in the MTUS or ODG, nor are they mentioned as part of monitoring for PPIs or NSAIDs. The worker in this case was using an NSAID and a PPI, and no other medications that the worker may have been taking were noted in the documents provided. The treating physician did not make it clear in their documentation of the encounter on 1/10/14 as to the reasoning for monitoring in order for the reviewer to consider an exception in this case. Therefore, the CBC, CMP, H. Pylori breath test, and stool guaiac x 3 are each not medically necessary.

**STOOL GUAIAIC X3:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Drug Testing Page(s): 43.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Pain Section, NSAIDS, GI Symptoms & Cardiovascular Risk, H. Pylori and NSAID Use.

**Decision rationale:** The California MTUS Guidelines do not specifically address testing for medication monitoring outside of urine drug testing for chronic opioid users. The ODG also does not recommend any testing for patients using NSAIDs or PPIs as in the case of this worker. The ODG mentions that H. pylori screening is not indicated in patients who are about to start NSAIDs or who are already taking NSAIDs. CBC, CMP, and stool guaiac testing was not addressed in the MTUS or ODG, nor are they mentioned as part of monitoring for PPIs or NSAIDs. The worker in this case was using an NSAID and a PPI, and no other medications that the worker may have been taking were noted in the documents provided. The treating physician did not make it clear in their documentation of the encounter on 1/10/14 as to the reasoning for monitoring in order for the reviewer to consider an exception in this case. Therefore, the CBC, CMP, H. Pylori breath test, and stool guaiac x 3 are each not medically necessary.