

<b>Case Number:</b>	CM14-0025484		
<b>Date Assigned:</b>	06/13/2014	<b>Date of Injury:</b>	05/19/2010
<b>Decision Date:</b>	08/05/2014	<b>UR Denial Date:</b>	01/23/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	02/27/2014

### 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 Physical Medicine and Rehabilitation, has a subspecialty in Interventional Spine 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 patient is a 51 year old with an injury date on 5/19/10. Patient complains of clicking in the right knee per 6/20/13 report. Patient has lost 28 pounds as of 6/20/13, and is taking Naprosyn, Lidocaine patch, and Omeprazol. Based on the 8/20/13 progress report provided by [REDACTED] the diagnosis is osteoarthritis of the lower leg. Most recent exam on 6/20/13 showed "right knee has effusion today. Also some edema more right than left." [REDACTED] is requesting Lovenox 40mg quantity 10 for deep venous thrombosis (DVT) prophylaxis. The utilization review determination being challenged is dated 1/23/14 and rejects request as ODG is not clear about treatment for DVT prophylaxis. [REDACTED] is the requesting provider, and he provided treatment reports from 8/20/13 to 3/11/14.

### IMR ISSUES, DECISIONS AND RATIONALES

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

#### **LOVENOX 40 MG QUANTITY 10 FOR DEEP VENOUS THROMBOSIS (DVT)**

**PROPHYLAXIS:** 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 Official Disability Guidelines (ODG) Knee Chapter, Venous Thrombosis Section.

**Decision rationale:** This patient presents with right knee pain and is s/p arthroscopic right knee surgery of unspecified date. The treater has asked for Lovenox 40mg quantity 10 for deep venous thrombosis (DVT) prophylaxis on 8/20/13. According to ODG, aspirin may be the most effective choice to prevent pulmonary embolism (PE) and venous thromboembolism (VTE) in patients undergoing orthopedic surgery, according to a new study examining a potential role for aspirin in these patients. Current evidence suggests it is needed for inpatients undergoing many orthopedic, general, and cancer-surgery procedures and should be given for at least seven to 10 days. In addition, prolonged prophylaxis for four to five weeks also shows a net clinical benefit in high-risk patients and procedures. In this case, it is highly possible the treater is planning a knee joint replacement, and has asked for Lovenox for deep venous thrombosis (DVT) prophylaxis. ODG guidelines, however, recommend aspirin for DVT prophylaxis unless the patient is a high-risk patient. There is no evidence that this patient is a high-risk patient for developing DVT/PE. The request is not medically necessary.