

Case Number:	CM14-0029221		
Date Assigned:	06/20/2014	Date of Injury:	08/29/1998
Decision Date:	11/26/2014	UR Denial Date:	02/10/2014
Priority:	Standard	Application Received:	03/07/2014

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 New York and North Carolina. 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 claimant worked for the fire department and had exposure to hazardous materials while performing firefighter duties approximately 15 years ago. He is diagnosed with chronic hepatitis, chronic non-alcoholic liver disease, and right upper quadrant abdominal pain. He also notes diarrhea 3-4 times per day. His provider requests abdominal ultrasound and abdominal CT to evaluate this complaint. He is appealing denial of the abdominal CT.

IMR ISSUES, DECISIONS AND RATIONALES

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

CT scan for abdomen: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation MDCT of the abdomen. Aschoff AJ, Department for Diagnostic Radiology, University Hospital of Ulm Feldman : Sleisenger & Fordtrans Gastrointestinal and Liver Disease, Chapter 111

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 2 General Approach to Initial Assessment and Documentation Page(s): 29-30. Decision based on Non-MTUS Citation http://www.medscape.com/viewarticle/722415_2 (Imaging of the Liver for Hepatocellular Carcinoma)

Decision rationale: There is overlap with ultrasound and CT in regards to success in imaging. The ultrasound was approved (and subsequently obtained with only findings of fatty liver) and should be carried out before additional testing. There is no rationale provided as to why both tests were needed at the outset, with no explanation of what information is sought that would not be found on ultrasound. Ultrasound is an appropriate way to evaluate the liver, gallbladder and biliary tree. It can measure flow within tumors; with contrast agents, tumors can also be detected. Ultrasound is useful real time during procedures. CT may be helpful to evaluate systemic metastases and differentiate tumors from cysts and hemangiomas. Both ultrasound and CT demonstrate the manifestations of cirrhosis and portal hypertension. Also like ultrasound, liver fibrosis is not directly imaged but rather inferred by the presence of surface nodularity, hepatic parenchymal heterogeneity, or signs of portal hypertension. Enhancing venous varices in any location, ascites, and splenomegaly are all easily imaged with CT. Additional information must be supplied, including what specifically is being evaluated or ruled out that can be found on CT but not ultrasound.