

Case Number:	CM14-0029271		
Date Assigned:	06/20/2014	Date of Injury:	02/21/2008
Decision Date:	07/30/2014	UR Denial Date:	02/27/2014
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 Internal Medicine and is licensed to practice in New York. 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 67 year old male who sustained an industrial injury on 02/21/2008. His diagnoses include hypertension, hyperlipidemia, myocardial infarction, and ischemic heart disease. He is s/p PCI with stents and CABG. On exam his vital signs are stable and his physical exam is unremarkable. The treating provider has requested Total T3, T4, Free T3, Free thyroxine and TSH.

IMR ISSUES, DECISIONS AND RATIONALES

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

Total T3, T4 (Thyroxine Total), Te Update (triiodothyronine), T3Free, Free Thyroxine, TSH: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation www.ncbi.nlm.nih.gov/pubmed/19961039 Title: Thyroid function test: a review. www.ncbi.nlm.nih.gov/pubmed/17923583 Title: Thyroid disease and the heart.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Medscape Internal Medicine 2013: Laboratory studies.

Decision rationale: There is no documentation of any physical exam findings consistent with thyroid dysfunction. Medical necessity for thyroid testing has not been established. The requested item is not medically necessary.