

<b>Case Number:</b>	CM14-0029497		
<b>Date Assigned:</b>	06/20/2014	<b>Date of Injury:</b>	12/05/2013
<b>Decision Date:</b>	07/23/2014	<b>UR Denial Date:</b>	02/10/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	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 Texas. 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 injured worker is a 61 year old male who reported a low back injury on 12/5/13. The clinical note dated 1/6/14 indicates the injured worker had been pulling on a dolly loaded with barrels of oil. The injured worker stated his hands were slippery from the oil when he slipped from the dolly and fell on the right side. The injured worker reported right hip and low back pain. The note indicates the injured worker utilizing Tylenol with Codeine to address the ongoing pain. There is an indication the injured worker has a significant past medical history involving the need for dialysis. The clinical note dated 12/5/13 indicates the injured worker being stable. The injured worker continued with the need for kidney care. The injured worker had been discharged to a skilled nursing facility in order to maintain his dialysis status. There is an indication the injured worker had a chronic renal failure before the fall. The injured worker's creatinine level was measured as 3.3. The injured worker had undergone the use of home health care. The home health nursing note dated 1/20/14 indicates the injured worker had a history of falls. The injured worker was identified as living with other persons within the home. The clinical note dated 1/25/14 indicates the injured worker had been diagnosed with diabetes myelitis. The injured worker had also sustained a right hip fracture at the initial incident. The injured worker had undergone an educational process to include monitoring of his blood sugars three times each day. Lab studies completed on 1/20/14 indicate that the injured worker's creatinine level measured at 4.36. The procedural note dated 1/2/14 indicates the injured worker undergoing insertion of an internal jugular vein catheter. The injured worker had tolerated the procedure well. The injured worker's creatinine level at that time was measured as 5.30. The injured worker had undergone an open reduction, internal fixation at the right hip following the fracture. Lab studies completed on 12/6/13 indicate the injured worker's glucose level to be at 207. Subsequent studies on

12/15/13 indicate the injured worker's continuation of high readings of glucose levels upwards of 188.

### **IMR ISSUES, DECISIONS AND RATIONALES**

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

#### **Skilled Nursing Services 2 time per week for 3 Weeks: Upheld**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Treatment Index, 11th Edition (web), 2013, Hip and Pelvis Chapter, Home Health Services.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 51.

**Decision rationale:** The documentation indicates the injured worker having sustained a right hip fracture. The clinical notes also indicate the injured worker undergoing dialysis to address kidney failure. There is an indication the injured worker had been admitted to a skilled nursing facility following the right hip fracture. The injured worker's glucose levels do appear to be in the 180-200 range. However, the injured worker had undergone a period of educational processing in order to monitor his own blood sugars. Additionally, the clinical notes indicate the injured worker having a family member within the home. Home health services are indicated for injured workers in need of intermittent and periodic part time care. However, the injured worker apparently has the ability to attend medical appointments. As such, the request is not medically necessary.

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