

<b>Case Number:</b>	CM14-0050514		
<b>Date Assigned:</b>	08/08/2014	<b>Date of Injury:</b>	10/02/2008
<b>Decision Date:</b>	11/12/2014	<b>UR Denial Date:</b>	03/07/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/24/2014

### 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 Orthopedic Surgery 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 claimant is a 41-year-old gentleman injured in a work related accident on 10/02/06. Clinical records provided for review include a 02/11/14 progress report documenting that the claimant had been authorized for total joint arthroplasty surgery. There are multiple pre-operative requests for this otherwise healthy, 41-year-old individual. This review is for a pre-operative history and physical examination, post-operative bi-weekly laboratory testing and Coumadin use, pre-operative laboratory testing, electrocardiogram and chest x-ray.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**History and physical:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation  
<http://www.guideline.gov/content.aspx?id=38289> Guideline Title: Preoperative evaluation

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) Chapter 7 Independent Medical Examinations and Consultations, page 127

**Decision rationale:** Based on California MTUS ACOEM Guidelines, pre-operative history and physical examination would be indicated. While this is an otherwise healthy, 41-year-old individual, he is undergoing an inpatient hospital admission for total joint arthroplasty surgery. Given the nature of the surgical process, the role of preoperative assessment prior to anesthesia and inpatient stay would be indicated. The request is medically necessary and appropriate.

**Bi-weekly laboratory international normalized ratio (INR) and partial thromboplastin time (PTT):** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation  
<http://www.ncbi.nlm.nih.gov/pubmed/10050694> Warfarin prophylaxis after total knee arthroplasty

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Treatment in Worker's Comp, 18th Edition, 2013 Updates: knee procedure - Venous thrombosis

**Decision rationale:** The Official Disability Guidelines would support the post-operative use of blood work to assess Coumadin levels. Coumadin is considered the standard of care for anti-coagulation following joint arthroplasty. Periodic assessment of blood levels to assess post-operative anti-coagulation would be necessary.

**Post-surgery Coumadin level for 6 weeks:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation  
<http://www.ncbi.nlm.nih.gov/pubmed/10050694> Warfarin prophylaxis after total knee arthroplasty

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Treatment in Worker's Comp, 18th Edition, 2013 Updates: knee procedure - Venous thrombosis

**Decision rationale:** The California MTUS and ACOEM Guidelines do not address this request. The Official Disability Guidelines would support the post-operative use of blood work to assess Coumadin levels. Coumadin is considered the standard of care for anti-coagulation following joint arthroplasty. Periodic assessment of blood levels to assess postoperative anti-coagulation would be indicated. The request is medically necessary and appropriate.

**Labs: Complete blood count (CBC), Comprehensive Metabolic Panel (CMP), Chem Panel:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines-Low Back, Preoperative lab testing

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) Chapter 7 Independent Medical Examinations and Consultations, page 127

**Decision rationale:** The California MTUS ACOEM Guidelines would support the role of preoperative lab testing as this individual is to undergo aggressive total joint arthroplasty surgery that would require significant anesthesia and postoperative inpatient stay. The role of assessment of both of the claimant's heart, lungs and underlying laboratory function would be supported. The request is medically necessary and appropriate.

**Electrocardiography (EKG):** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines-Low Back, Preoperative electrocardiogram

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) Chapter 7 Independent Medical Examinations and Consultations, page 127

**Decision rationale:** The California MTUS ACOEM Guidelines would support the role of pre-operative Electrocardiogram (EKG) testing as this individual is to undergo aggressive total joint arthroplasty surgery that would require significant anesthesia and postoperative inpatient stay. The role of assessment of both of the claimant's heart, lungs and underlying laboratory function would be supported. The request is medically necessary.

**Chest x-ray:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines-Low Back, Preoperative Testing, General

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) Chapter 7 Independent Medical Examinations and Consultations, page 127

**Decision rationale:** The California MTUS ACOEM Guidelines would support the role of preoperative chest x-ray as this individual is to undergo aggressive total joint arthroplasty surgery that would require significant anesthesia and postoperative inpatient stay. The role of assessment of both of the claimant's heart, lungs and underlying laboratory function would be supported. The request is medically necessary.

