

Case Number:	CM14-0072492		
Date Assigned:	07/16/2014	Date of Injury:	04/26/2012
Decision Date:	09/22/2014	UR Denial Date:	04/22/2014
Priority:	Standard	Application Received:	05/19/2014

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 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 applicant is a represented [REDACTED] employee who has filed a claim for chronic shoulder pain and major depressive disorder reportedly associated with an industrial injury of April 26, 2012. Thus far, the applicant has been treated with analgesic medications; earlier shoulder surgery on February 1, 2013; and unspecified amounts of physical therapy. In a Utilization Review Report dated April 22, 2014, the claims administrator denied a request for deep venous thrombosis prophylaxis. It was suggested that the applicant was pending a repeat right shoulder arthroscopy and subacromial decompression surgery. The applicant's attorney subsequently appealed. In a medical-legal evaluation dated June 9, 2014, the applicant was described as having persistent complaints of shoulder pain. It was stated that the applicant had had arthroscopic shoulder surgery on June 2, 2014. The applicant had not worked in several years, and last worked on October 8, 2012, it was stated. The applicant was presently on total temporary disability, it was stated. In a June 17, 2014 progress note, the applicant was described as status post earlier shoulder surgery. The applicant was given a prescription for Diclofenac, Prilosec, tramadol, and Wellbutrin. The applicant was placed off of work. Shoulder pain and depression were the operating diagnoses. In a Doctor's First Report (DFR) dated November 19, 2013, the applicant was described as having no medical history.

IMR ISSUES, DECISIONS AND RATIONALES

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

Deep Vein Thrombosis (DVT) Prophylaxis: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines: Shoulder (updated 03/21/14), Venous Thrombosis.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Deep venous thromboembolism after arthroscopy of the shoulder: Two case reports and a review of the literature, Garofalo et al.

Decision rationale: The MTUS does not address the topic. As noted by Garofalo, deep venous thrombosis has an incidence of one case per thousand inhabitants and is "very rare" after shoulder arthroscopy, the procedure which transpired here. The current guidelines do not, thus, recommend administration of DVT prophylaxis in shoulder arthroscopy procedures, as transpired here. In this case, there was no mention of any applicant-specific risk factor such as a prior DVT, tumor, prolonged immobility, etc., which would have compelled provision of DVT prophylaxis following the arthroscopic shoulder surgery which reportedly transpired here. Therefore, the request is not medically necessary.