MAXIMUS Federal Services

Case Number:	CM14-0074777		
Date Assigned:	07/16/2014	Date of Injury:	05/31/2005
Decision Date:	09/17/2014	UR Denial Date:	05/07/2014
Priority:	Standard	Application Received:	05/22/2014

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 Physical Medicine & Rehabilitation and Pain Management, has a subspecialty in Interventional Spine 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 patient is a 51 year old with an injury date on 5/31/06. Patient complains of continued lower lumbar pain radiating into right leg per 4/25/14 report. Patient had bilateral carpal tunnel release 7 weeks ago, but numbness/tingling has resolved per 4/25/14 report. The right thumb he uses for his walker has symptoms of trigger with catching/locking that wakes him up at night per 4/25/14 report. Based on the 4/25/14 progress report provided by [redacted] the diagnoses are: 1. carpal tunnel syndrome2. Trigger finger, right thumb3. Back pain4. S/p (Status Post) carpal tunnel releaseExam on 4/25/14 showed "patient is ambulating with a walker. Has poor balance in his gait. Restricted range of motion of L-spine, with right/left lateral bending at 10 degrees, extension at 0 degrees." [redacted] is requesting CBC and urine analysis for pre-op medical clearance. The utilization review determination being challenged is dated 5/7/14. [redacted] is the requesting provider, and he provided treatment reports from 12/17/13 to 4/25/14.

IMR ISSUES, DECISIONS AND RATIONALES

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

CBC (Complete Blood Count) and Urine analysis for Pre-Operative Medical Clearance: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 271.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG-TWC, Pain,urine drug testing.

Decision rationale: This patient presents with lower back pain and right leg pain. The treater has asked for CBC and urinalysis for pre-operative medical clearance on4/25/14. Patient is preparing for a future trigger release surgery for the right thumb per 4/25/14 report. Regarding pre-operative lab testing, ODG guidelines state that they are used excessively. For preoperative urinalysis, it is recommended for invasive urologic procedures and those undergoing implantation of foreign material. A complete blood count is indicated for patients with diseases that increase the risk of anemia or patients in whom significant perioperative blood loss is anticipated. This patient is scheduled for a trigger finger release and does not require pre-operative urinalysis or CBC. Therefore, the request of CBC (Complete Blood Count) and Urine analysis for Pre-Operative Medical Clearance is not medically necessary and appropriate.