

<b>Case Number:</b>	CM14-0093666		
<b>Date Assigned:</b>	09/12/2014	<b>Date of Injury:</b>	01/06/2005
<b>Decision Date:</b>	10/13/2014	<b>UR Denial Date:</b>	06/04/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/20/2014

### 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 Emergency 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 58-year-old male who reported an injury on 01/06/2005. The mechanism of injury was not provided. On 03/11/2014, the injured worker presented with no complaints. The diagnosis was hypertension, essential, benign. Blood pressure measured 136/90. The physical examination presented negative results. There were no diagnostic tests provided. The provider recommended a CBC, lipid panel, thyroid panel, uric acid, GGT, Vitamin D level, hemoglobin A1C, a polio protein A/B, and fatty acid profile. The provider's rationale was not provided. The Request for Authorization form was dated 03/11/2014.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**CBC:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs Page(s): 70.

**Decision rationale:** The request for a CBC is not medically necessary. The California MTUS Guidelines recommend periodic lab monitoring of a chemistry profile including liver and renal function tests. The guidelines recommend measuring liver transaminase within 4 to 8 weeks after

starting therapy, but the interval of repeated lab tests after the treatment duration has not been established. Routine blood pressure monitoring is, however, recommended. The provider's rationale was not provided within the medical documents. It is unclear when the laboratory monitoring was last performed. The clinical information did not provide any evidence of status change that would require lab testing. As such, medical necessity has not been established.

**Lipid Panel:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Anti-epileptic medications.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs Page(s): 70.

**Decision rationale:** The request for a lipid panel is not medically necessary. The California MTUS Guidelines recommend periodic lab monitoring of a chemistry profile including liver and renal function tests. The guidelines recommend measuring liver transaminase within 4 to 8 weeks after starting therapy, but the interval of repeated lab tests after the treatment duration has not been established. Routine blood pressure monitoring is, however, recommended. The provider's rationale was not provided within the medical documents. It is unclear when the laboratory monitoring was last performed. The clinical information did not provide any evidence of status change that would require lab testing. As such, medical necessity has not been established.

**Total Thyroid:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation labtestonline.org

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs Page(s): 70.

**Decision rationale:** The request for a thyroid total is not medically necessary. The California MTUS Guidelines recommend periodic lab monitoring of a chemistry profile including liver and renal function tests. The guidelines recommend measuring liver transaminase within 4 to 8 weeks after starting therapy, but the interval of repeated lab tests after the treatment duration has not been established. Routine blood pressure monitoring is, however, recommended. The provider's rationale was not provided within the medical documents. It is unclear when the laboratory monitoring was last performed. The clinical information did not provide any evidence of status change that would require lab testing. As such, medical necessity has not been established.

**Thyroid Free:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation labtestonline.org

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs Page(s): 70.

**Decision rationale:** The request for a thyroid free is not medically necessary. The California MTUS Guidelines recommend periodic lab monitoring of a chemistry profile including liver and renal function tests. The guidelines recommend measuring liver transaminase within 4 to 8 weeks after starting therapy, but the interval of repeated lab tests after the treatment duration has not been established. Routine blood pressure monitoring is, however, recommended. The provider's rationale was not provided within the medical documents. It is unclear when the laboratory monitoring was last performed. The clinical information did not provide any evidence of status change that would require lab testing. As such, medical necessity has not been established.

**Thyroid Panel:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation labtestonline.org

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs Page(s): 70.

**Decision rationale:** The request for a thyroid panel is not medically necessary. The California MTUS Guidelines recommend periodic lab monitoring of a chemistry profile including liver and renal function tests. The guidelines recommend measuring liver transaminase within 4 to 8 weeks after starting therapy, but the interval of repeated lab tests after the treatment duration has not been established. Routine blood pressure monitoring is, however, recommended. The provider's rationale was not provided within the medical documents. It is unclear when the laboratory monitoring was last performed. The clinical information did not provide any evidence of status change that would require lab testing. As such, medical necessity has not been established.

**TSH:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation labtestonline.org

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs Page(s): 70.

**Decision rationale:** The request for a TSH is not medically necessary. The California MTUS Guidelines recommend periodic lab monitoring of a chemistry profile including liver and renal function tests. The guidelines recommend measuring liver transaminase within 4 to 8 weeks after starting therapy, but the interval of repeated lab tests after the treatment duration has not been established. Routine blood pressure monitoring is, however, recommended. The provider's rationale was not provided within the medical documents. It is unclear when the laboratory

monitoring was last performed. The clinical information did not provide any evidence of status change that would require lab testing. As such, medical necessity has not been established.

**Uric Acid:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation [drugs.com](http://drugs.com)

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs Page(s): 70.

**Decision rationale:** The request for a uric acid is not medically necessary. The California MTUS Guidelines recommend periodic lab monitoring of a chemistry profile including liver and renal function tests. The guidelines recommend measuring liver transaminase within 4 to 8 weeks after starting therapy, but the interval of repeated lab tests after the treatment duration has not been established. Routine blood pressure monitoring is, however, recommended. The provider's rationale was not provided within the medical documents. It is unclear when the laboratory monitoring was last performed. The clinical information did not provide any evidence of status change that would require lab testing. As such, medical necessity has not been established.

**GGT:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation [labtestonline.org](http://labtestonline.org)

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs Page(s): 70.

**Decision rationale:** The request for a GGT is not medically necessary. The California MTUS Guidelines recommend periodic lab monitoring of a chemistry profile including liver and renal function tests. The guidelines recommend measuring liver transaminase within 4 to 8 weeks after starting therapy, but the interval of repeated lab tests after the treatment duration has not been established. Routine blood pressure monitoring is, however, recommended. The provider's rationale was not provided within the medical documents. It is unclear when the laboratory monitoring was last performed. The clinical information did not provide any evidence of status change that would require lab testing. As such, medical necessity has not been established.

**Ferritin:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation [labtestonline.org](http://labtestonline.org)

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs Page(s): 70.

**Decision rationale:** The request for a Ferritin is not medically necessary. The California MTUS Guidelines recommend periodic lab monitoring of a chemistry profile including liver and renal function tests. The guidelines recommend measuring liver transaminase within 4 to 8 weeks after starting therapy, but the interval of repeated lab tests after the treatment duration has not been established. Routine blood pressure monitoring is, however, recommended. The provider's rationale was not provided within the medical documents. It is unclear when the laboratory monitoring was last performed. The clinical information did not provide any evidence of status change that would require lab testing. As such, medical necessity has not been established.

**Vitamin D level:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation labtestonline.org

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs Page(s): 70.

**Decision rationale:** The request for a Vitamin D level is not medically necessary. The California MTUS Guidelines recommend periodic lab monitoring of a chemistry profile including liver and renal function tests. The guidelines recommend measuring liver transaminase within 4 to 8 weeks after starting therapy, but the interval of repeated lab tests after the treatment duration has not been established. Routine blood pressure monitoring is, however, recommended. The provider's rationale was not provided within the medical documents. It is unclear when the laboratory monitoring was last performed. The clinical information did not provide any evidence of status change that would require lab testing. As such, medical necessity has not been established.

**Hemoglobin A1C:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines -HBA1C

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Diabetes, Glucose Monitoring.

**Decision rationale:** The request for hemoglobin A1C is not medically necessary. The Official Disability Guidelines recommend self monitoring of blood glucose for injured workers with type 1 diabetes and for those with type 2 diabetes who use insulin therapy. An A1C should be measured at least twice yearly in all injured workers with diabetes mellitus and at least 4 times yearly in injured workers not at the target level. There is lack of documentation that the injured worker has a diagnosis congruent with the guideline recommendation for an A1C test. As such, medical necessity has not been established.

**Apolipoprotein A/B:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation labtestonline.org

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs Page(s): 70.

**Decision rationale:** The request for an Apolipoprotein A/B is not medically necessary. The California MTUS Guidelines recommend periodic lab monitoring of a chemistry profile including liver and renal function tests. The guidelines recommend measuring liver transaminase within 4 to 8 weeks after starting therapy, but the interval of repeated lab tests after the treatment duration has not been established. Routine blood pressure monitoring is, however, recommended. The provider's rationale was not provided within the medical documents. It is unclear when the laboratory monitoring was last performed. The clinical information did not provide any evidence of status change that would require lab testing. As such, medical necessity has not been established.

**Fatty Acid Profile:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lake Lab Services

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs Page(s): 70.

**Decision rationale:** The request for a fatty acid is not medically necessary. The California MTUS Guidelines recommend periodic lab monitoring of a chemistry profile including liver and renal function tests. The guidelines recommend measuring liver transaminase within 4 to 8 weeks after starting therapy, but the interval of repeated lab tests after the treatment duration has not been established. Routine blood pressure monitoring is, however, recommended. The provider's rationale was not provided within the medical documents. It is unclear when the laboratory monitoring was last performed. The clinical information did not provide any evidence of status change that would require lab testing. As such, medical necessity has not been established.