

Case Number:	CM13-0011606		
Date Assigned:	07/16/2014	Date of Injury:	04/07/2009
Decision Date:	05/12/2015	UR Denial Date:	07/25/2013
Priority:	Standard	Application Received:	08/14/2013

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: New York

Certification(s)/Specialty: Internal Medicine

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 65 year old male, who sustained an industrial injury on April 7, 2009. The injured worker was diagnosed as having hypertension with right atrial enlargement, slight heart disease, status post right nephrectomy secondary to renal cell carcinoma, renal insufficiency, incisional hernia, status post gastric bypass, psoriasis, and status post abdominal surgery. Treatment to date has included diet modification and medication. Currently, the injured worker complains of high blood pressure. The Treating Physician's report dated July 16, 2013, noted the injured worker had a history of a nephrectomy with one remaining kidney. The injured worker reported blood pressures at home from around 144 to 160 range systolically and around 77 to 85 on the diastolic side. Physical examination was noted to show sinus bradycardia without murmur, gallop, or click. The injured worker underwent impedance plethysmography study to assess his systemic vascular resistance index, revealing a blood pressure of 177/89 with a systemic vascular resistance index (SVRI) of 1,921. The Physician noted that since the injured worker only had one kidney with evidence of proteinuria, it was necessary to be very aggressive with the blood pressure control. The injured worker was noted to have renal insufficiency with a creatinine of 1.62. The injured worker's current medications were noted to include Edarbi and Bystolic, with the Physician adding Norvasc.

IMR ISSUES, DECISIONS AND RATIONALES

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

IPG (Impedance Plethysmography): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation www.bcbsms.com.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Medscape Internal medicine 2013- Plethysmography.

Decision rationale: There is no documentation provided necessitating the request for total body plethysmography. Per Medscape Internal Medicine, plethysmography is a noninvasive technique for measuring the blood flow to an organ, body region, or limb. Total body plethysmography is used to measure total lung capacity and functional residual capacity of the lungs. Plethysmography is used as the sole diagnostic modality to diagnose deep vein thrombosis and arterial occlusive disease. The claimant has a history of hypertension and right atrial enlargement. Per his treating provider he has high vascular resistance and requires regular monitoring with plethysmography. He is maintained on medical therapy for blood pressure control. There is no indication for routine plethysmography screening for monitoring of his conditions. He has no history of deep venous thrombosis, circulatory or active cardiovascular symptoms. Medical necessity for the requested item has not been established. The requested item is not medically necessary.