

<b>Case Number:</b>	CM14-0192685		
<b>Date Assigned:</b>	11/26/2014	<b>Date of Injury:</b>	04/06/1999
<b>Decision Date:</b>	01/30/2015	<b>UR Denial Date:</b>	11/04/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/18/2014

### 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 Family Practice, and is licensed to practice in North Carolina. 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 53-year-old with a reported date of injury of 04/06/1999. The patient has the diagnoses of esophageal reflux and inguinal hernia. Per the progress notes provided for review from the primary treating physician dated 11/04/2014, the patient's reflux symptoms were better on the Nexium and occasional Ranitidine, The physical exam noted no abnormalities. The treatment plan recommendations included blood work and continuation of medications.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Complete blood count; lipid panel, total T3, T4, T3 update for date of service 11/04/2014:**  
Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lab tests online - <http://labtestsonline.org/understanding/analytes/cbc/tab/test>, and <http://labtestsonline.org/understanding/analytes/tsh/tab/test>

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Up to Date Medical Guidelines.

**Decision rationale:** The California MTUS, ACOEM and the ODG do not specifically address the requested services. Per the Up to Date Guidelines, the following lab tests are indicated for specific conditions. Complete blood counts are indicated in the evaluation of anemia, infection, immune status and other disease states. Lipid panel are indicated in the evaluation of lipid disease, cardiovascular disease and certain other specified disease states. Thyroid labs are indicated in the evaluation of thyroid disease and other specific disease states/symptoms. Chronic reflux disease and inguinal hernia are not listed disease. Therefore the medical necessity for them has not been established and the reasoning of ordering because the patient has not had blood work in a year does not meet guideline criteria. Therefore the request is not medically necessary.

**T3 free, free thyroxine TSH, venipuncture, basic metabolic panel for date of service**

**11/04/2014: Upheld**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lab tests online - <http://labtestsonline.org/understanding/analytes/tsh/tab/test>, and <http://labtestsonline.org/understanding/analytes/bmp/>

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Up to Date Medical Guidelines.

**Decision rationale:** The California MTUS, ACOEM and the ODG do not specifically address the requested services. Per the Up to Date Guidelines, the following lab tests are indicated for specific conditions. Thyroid labs are indicated in the evaluation of thyroid disease and other specific disease states/symptoms. The patient does not have a diagnosis of thyroid disease or any symptoms of thyroid disease. Chronic reflux disease and inguinal hernia are not listed disease. Therefore the medical necessity for them has not been established and the reasoning of ordering because the patient has not had blood work in a year does not meet guideline criteria. Therefore the request is not medically necessary.

**Hepatic function panel, uric acid, GGTP, serum ferritin, VIT D, 25-hydroxy for date of service 11/04/2014: Upheld**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lab test online - <http://labtestsonline.org/understanding/analytes/bmp/>

**MAXIMUS guideline:** The Expert Reviewer did not cite any medical evidence for its decision.

**Decision rationale:** The California MTUS, ACOEM and the ODG do not specifically address the requested services. Per the Up to Date Guidelines, the following lab tests are indicated for specific conditions. Hepatic function tests are indicated in the evaluation of potential liver disorders and chronic medication side effects for medications that are processed through the liver. Uric acid level is indicated in the evaluation of gout or uric acid metabolism disorders. GGTP is indicated in the evaluation of liver disorders. Serum ferritin is indicated in the

evaluation of iron disorders. Vita min D is indicated in the evaluation of potential vitamin deficiency and bone metabolism disorders. Chronic reflux disease and inguinal hernia are not listed disease Therefore the medical necessity for them has not been established and the reasoning of ordering because the patient has not had blood work in a year does not meet guideline criteria. Therefore the request is not medically necessary.

**Apoilipoprotein A, Apoilipoprotein B, glyco hemoglobin A1C for date of service 11/04/2014:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lab tests online - <http://labtestsonline.org/understanding/analytes/a1c/tab/test>

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Up to Date medical guidelines.

**Decision rationale:** The California MTUS, ACOEM and the ODG do not specifically address the requested services. Per the Up to Date Guidelines, the following lab tests are indicated for specific conditions. Apolipoprotein A and B are indicated in the evaluation of cardiovascular or lipid disorders. Hemoglobin A1C is indicated in the evaluation of diabetes and blood sugar disorders. The patient does not have the diagnoses of diabetes or cardiovascular or lipid disease. Chronic reflux disease and inguinal hernia are not listed disease Therefore the medical necessity for them has not been established and the reasoning of ordering because the patient has not had blood work in a year does not meet guideline criteria. Therefore the request is not medically necessary.