

Case Number:	CM14-0207518		
Date Assigned:	12/19/2014	Date of Injury:	08/19/2009
Decision Date:	02/18/2015	UR Denial Date:	11/19/2014
Priority:	Standard	Application Received:	12/11/2014

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. 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: California

Certification(s)/Specialty: Physical Medicine & Rehabn

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

According to the 10/17/2014 report, this patient presents with "pain in his right knee traveling to his right lower extremity which he describes as dull and aching. The current request is for Naprosyn 500 mg #60 with 3 refills. The MTUS Guidelines page22 reveal the following regarding NSAID's, "Anti-inflammatories are the traditional first line of treatment, to reduce pain so activity and functional restoration can resume, but long-term use may not be warranted." Review of the provided report, the treating physician indicates "The patient reports that the use of naprosyn sodium is helpful in reducing sequelae arising from his injury." In this case, given that the patient's chronic pain and the treating physician documented the efficacy of the medication as required by the MTUS guidelines. Therefore, the current request is medically necessary.

IMR ISSUES, DECISIONS AND RATIONALES

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

Basic Metabolic Panel (Chem) QTY: 1.00: 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, specific drug list & adverse effects Page(s): 70.

Decision rationale: According to the 10/20/2014 report, this patient presents with low back pain that is rated as a 4/10. The current request is for Basic metabolic panel (chem) Qty: 100. The MTUS, ACOEM, and ODG Guidelines do not specifically discuss routine laboratory testing. However, the MTUS Guidelines page 70 does discuss "periodic lab monitoring of CBC and chemistry profile (including liver and renal function tests)." MTUS states that monitoring of CBC is recommended when patients take NSAIDs. It goes on to state, "There has been a recommendation to measure liver and transaminases within 4 to 8 weeks after starting therapy, but the interval of repeating lab tests after this treatment duration has not been established." The patient's current list of medications includes Omeprazole and Nocro. In this case, the treating physician has not prescribed NSAIDs and MTUS supports CBC lab monitoring for patient that are taking NSAID, and other tests lab tests are not supported by MTUS. This request is not medically necessary.

Hepatic Function Panel QTY: 1.00: 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, specific drug list & adverse effects Page(s): 70.

Decision rationale: According to the 10/20/2014 report, this patient presents with low back pain that is rated as a 4/10. The current request is for Hepatic function panel Qty: 1.00. The MTUS, ACOEM, and ODG Guidelines do not specifically discuss routine laboratory testing. However, the MTUS Guidelines page 70 does discuss "periodic lab monitoring of CBC and chemistry profile (including liver and renal function tests)." MTUS states that monitoring of CBC is recommended when patients take NSAIDs. It goes on to state, "There has been a recommendation to measure liver and transaminases within 4 to 8 weeks after starting therapy, but the interval of repeating lab tests after this treatment duration has not been established." The patient's current list of medications includes Omeprazole and Nocro. In this case, the treating physician has not prescribed NSAIDs and MTUS supports CBC lab monitoring for patient that are taking NSAID, and other tests lab tests are not supported by MTUS. This request is not medically necessary.

Creatine Phosphokinase (PK) QTY: 1.00: 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, specific drug list & adverse effects Page(s): 70.

Decision rationale: According to the 10/20/2014 report, this patient presents with low back pain that is rated as a 4/10. The current request is for Creatine Phosphokinase (PK) Qty1.00. The MTUS, ACOEM, and ODG Guidelines do not specifically discuss routine laboratory testing. However, the MTUS Guidelines page 70 does discuss "periodic lab monitoring of CBC and chemistry profile (including liver and renal function tests)." MTUS states that monitoring of CBC is recommended when patients take NSAIDs. It goes on to state, "There has been a recommendation to measure liver and transaminases within 4 to 8 weeks after starting therapy, but the interval of repeating lab tests after this treatment duration has not been established." In this case, the treating physician has requested lab work above and beyond the recommendations from the MTUS guidelines. CPK (creatin phosphokinase) is primarily testing for: heart attack, evaluate the cause of chest pain and for the detection of muscle damage, dermatomyositis, polymyositis and other muscle diseases. This test is not recommended per MTUS. The request is not medically necessary.

C-reactive protein (CRP) QTY: 1.00: 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, specific drug list & adverse effects Page(s): 70.

Decision rationale: According to the 10/20/2014 report, this patient presents with low back pain that is rated as a 4/10. The current request is for C-reactive protein (CRP) Qty: 1.00. The MTUS, ACOEM, and ODG Guidelines do not specifically discuss routine laboratory testing. However, the MTUS Guidelines page 70 does discuss "periodic lab monitoring of CBC and chemistry profile (including liver and renal function tests)." MTUS states that monitoring of CBC is recommended when patients take NSAIDs. It goes on to state, "There has been a recommendation to measure liver and transaminases within 4 to 8 weeks after starting therapy, but the interval of repeating lab tests after this treatment duration has not been established." In this case, the treating physician has requested lab work above and beyond the recommendations from the MTUS guidelines. CRP (C-Reactive Protein) is a blood test to measure inflammation. This test is not recommended per MTUS. The request is not medically necessary.

Arthritis Panel QTY: 1.00: 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, specific drug list & adverse effects Page(s): 70.

Decision rationale: According to the 10/20/2014 report, this patient presents with low back pain that is rated as a 4/10. The current request is for Arthritis Panel Qty: 1.00. The MTUS, ACOEM, and ODG Guidelines do not specifically discuss routine laboratory testing. However, the MTUS Guidelines page 70 does discuss "periodic lab monitoring of CBC and chemistry

profile (including liver and renal function tests)." MTUS states that monitoring of CBC is recommended when patients take NSAIDs. It goes on to state, "There has been a recommendation to measure liver and transaminases within 4 to 8 weeks after starting therapy, but the interval of repeating lab tests after this treatment duration has not been established." The patient's current list of medications includes Omeprazole and Norco. In this case, the treating physician has not prescribed NSAIDs and MTUS supports CBC lab monitoring for patient that are taking NSAID, and other tests lab tests are not supported by MTUS. This request is not medically necessary.

Complete Blood Count (CBC) QTY: 1.00: 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, specific drug list & adverse effects Page(s): 70.

Decision rationale: According to the 10/20/2014 report, this patient presents with low back pain that is rated as a 4/10. The current request is for Complete blood count (CBC) Qty: 1.00. The MTUS, ACOEM, and ODG Guidelines do not specifically discuss routine laboratory testing. However, the MTUS Guidelines page 70 does discuss "periodic lab monitoring of CBC and chemistry profile (including liver and renal function tests)." MTUS states that monitoring of CBC is recommended when patients take NSAIDs. It goes on to state, "There has been a recommendation to measure liver and transaminases within 4 to 8 weeks after starting therapy, but the interval of repeating lab tests after this treatment duration has not been established." The patient's current list of medications includes Omeprazole and Nocro. In this case, the treating physician has not prescribed NSAIDs and MTUS supports CBC lab monitoring for patient that are taking NSAID, and other tests lab tests are not supported by MTUS. This request is not medically necessary.