

Case Number:	CM14-0207674		
Date Assigned:	12/19/2014	Date of Injury:	10/15/2013
Decision Date:	02/18/2015	UR Denial Date:	12/11/2014
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: Texas, Ohio, California

Certification(s)/Specialty: Preventive Medicine, Occupational 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 applicant is a represented [REDACTED] employee who has filed a claim for chronic shoulder pain reportedly associated with an industrial injury of October 15, 2013. In a Utilization Review Report dated December 11, 2014, the claims administrator denied a request for a DVT rental device. The claims administrator referenced progress notes and bill dated July 18, 2014 and July 12, 2014 in its determination. The applicant's attorney subsequently appealed. In a September 8, 2014 preoperative history and physical, the applicant was described as pending shoulder surgery on September 12, 2014. The DVT prophylaxis device was endorsed via September 12, 2014 order form, which contained little-to-no applicant-specific information. It was suggested that the device was being endorsed for DVT prophylaxis purposes. The attending provider stated, through preprinted checkboxes, that the applicant was morbidly obese and was undergoing a procedure under general anesthesia. In a June 25, 2014 progress note, the applicant was given a shoulder corticosteroid injection. The applicant's past medical history was not detailed. The applicant did ultimately undergo a September 12, 2014 shoulder arthroscopy procedure, debridement, synovectomy, decompression, and acromioplasty procedure. The total procedure time was not detailed. In a later note dated November 12, 2014, the applicant was returned to regular duty work.

IMR ISSUES, DECISIONS AND RATIONALES

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

Deep Vein Thrombosis (DVT) Prophylaxis unit 30 day rental: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Knee & Leg, Venous Thrombosis

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Garofalo et al, Deep Venous Thromboembolism After Arthroscopy of the Shoulder: Two Case Reports and Review of the Literature

Decision rationale: The MTUS does not address the topic. The review article entitled deep venous thromboembolism after arthroscopy of the shoulder, however, takes the position that DVT is "very rare" after arthroscopy of the shoulder, with current guidelines advising against the administration of DVT prophylaxis and shoulder arthroscopy procedures, as transpired here. In this case, the attending provider did not outline any compelling applicant-specific risk factors such as a history of prior DVT, family history of blood dyscrasias, etc., which would have compelled a 30-day rental of the DVT prophylaxis device. It is further noted that the injured worker appeared to have experienced an expedient postoperative recovery and had seemingly returned to regular duty work on or around the two-month mark of the date of surgery. Thus, it did not appear that the injured worker was immobile for a protracted amount of time postoperatively and/or would have required DVT prophylaxis for a span of one month postoperatively. Therefore, the request is not medically necessary.