

Case Number:	CM15-0104027		
Date Assigned:	06/08/2015	Date of Injury:	04/07/2001
Decision Date:	07/09/2015	UR Denial Date:	05/14/2015
Priority:	Standard	Application Received:	05/29/2015

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, Florida, 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 injured worker is a 64 year old female who sustained an industrial injury on 4/7/01. The injured worker was diagnosed as having cervical non-union. Currently, the injured worker was with complaints of cervical pain. Previous treatments included status post laminectomy. Previous diagnostic studies included computed tomography of the cervical spine. The plan of care was for diagnostic studies and laboratory studies.

IMR ISSUES, DECISIONS AND RATIONALES

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

Pre-operative clearance: CMP, QTY: 1: 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), Preoperative testing.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.nlm.nih.gov/health/health-topics/topics/bdt/>. National Library of Medicine regarding testing.

Decision rationale: This claimant was injured 14 years ago. There was a cervical non-union, and ongoing cervical pain. The patient is post laminectomy. There had been previous CT scans. There are no plans laid out regarding whether the claimant is a surgical candidate, which is key, especially given past surgical efforts have failed. Further, criteria are not met for this comprehensive metabolic panel blood test. The MTUS and ODG are silent on blood tests. Other resources were examined. The National Institutes of Health notes that blood tests check for certain diseases and conditions, the function of your organs, show how well treatments are working, diagnose diseases and conditions such as cancer, HIV/AIDS, diabetes, anemia, and coronary heart disease, find out if there are risk factors for heart disease, check whether medicines are working, or if blood is clotting. In this case, the doctor does not disclose the basis for the blood tests; and it is not clear the impact on improving the patient's functionality post injury. The request is not medically necessary.

Pre-operative clearance: PT, QTY: 1: 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), Preoperative testing.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.nhlbi.nih.gov/health/health-topics/topics/bdt/> regarding blood and other tests.

Decision rationale: This claimant was injured 14 years ago. There was a cervical non-union, and ongoing cervical pain. The patient is post laminectomy. There had been previous CT. There are no plans laid out regarding whether the claimant is a surgical candidate, given the failure of the prior surgery. Specifically, the MTUS and ODG are silent on blood tests. Other resources were examined. The National Institutes of Health notes that blood tests check for certain diseases and conditions, the function of your organs, show how well treatments are working, diagnose diseases and conditions such as cancer, HIV/AIDS, diabetes, anemia, and coronary heart disease, find out if there are risk factors for heart disease, check whether medicines are working, or if blood is clotting. In this case, the doctor does not disclose the basis for the blood tests; and it is not clear the impact on improving the patient's functionality post injury. Also, if rendered as a pre-operative blood test, the requisite need for surgery is not established. Therefore, the request is not medically necessary.

Pre-operative clearance: PTT, QTY: 1: 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), Preoperative testing.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.nhlbi.nih.gov/health/health-topics/topics/bdt/> under blood and other testing.

Decision rationale: This claimant was injured 14 years ago. There was a cervical non-union, and ongoing cervical pain. The patient is post laminectomy. There had been previous CT. There are no plans laid out regarding whether the claimant is a surgical candidate, given the failure of the prior surgery. Specifically, the MTUS and ODG are silent on blood tests. Other resources were examined. The National Institutes of Health notes that blood tests check for certain diseases and conditions, the function of your organs, show how well treatments are working, diagnose diseases and conditions such as cancer, HIV/AIDS, diabetes, anemia, and coronary heart disease, find out if there are risk factors for heart disease, check whether medicines are working, or if blood is clotting. In this case, the doctor does not disclose the basis for the blood tests; and it is not clear the impact on improving the patient's functionality post injury. Also, if rendered as a pre-operative blood test, the requisite need for surgery is not established. Therefore, the request is not medically necessary.

Pre-operative clearance: Chest X-ray, QTY: 1: 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), Preoperative testing.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Medical Disability Advisor <http://www.mdguidelines.com/imaging>.

Decision rationale: The current California web-based MTUS collection was reviewed in addressing this request. The guidelines are silent in regards to this request. Therefore, in accordance with state regulation, other evidence-based or mainstream peer-reviewed guidelines will be examined. This claimant was injured 14 years ago. There was a cervical non-union, and ongoing cervical pain. The patient is post laminectomy. There had been previous CT. There are no plans laid out regarding whether the claimant is a surgical candidate, given the failure of the prior surgery. Chest x-rays are used in multiple clinical situations to evaluate the chest and lung cavity and structure. There is no mention of what is driving the need for a surgery, so doing a CXR as a pre-surgical screen is unnecessary. The request is not medically necessary.

Pre-operative clearance: EKG, QTY: 1: 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), Preoperative electrocardiogram (ECG).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.mdguidelines.com/electrocardiogram>.

Decision rationale: The current California web-based MTUS collection was reviewed in addressing this request. The guidelines are silent in regards to this request. Therefore, in accordance with state regulation, other evidence-based or mainstream peer-reviewed guidelines will be examined. This claimant was injured 14 years ago. There was a cervical non-union, and

ongoing cervical pain. The patient is post laminectomy. There had been previous CT. There are no plans laid out regarding whether the claimant is a surgical candidate, given the failure of the prior surgery. Per the Medical Disability Advisor citation, the ECG (also known as EKG) is essential in the diagnosis of various disease conditions of the heart, including coronary artery disease (angina and heart attack), disturbances in heart rhythm (arrhythmias), disturbances in electrical conduction (heart blocks), thickening of the heart muscle, or acute inflammation of the membrane that covers the heart (acute pericarditis). It can be used to determine whether heart damage is due to a recent heart attack (myocardial infarction) or an old one. The procedure is commonly performed during routine periodic physical examination. In this case, there is no chest pain of a cardiac nature, and no cardiac issues. The clinical necessity of doing this test is not apparent from the medical records provided. This request is not medically necessary.