

Case Number:	CM15-0132818		
Date Assigned:	07/20/2015	Date of Injury:	04/10/2002
Decision Date:	08/19/2015	UR Denial Date:	07/07/2015
Priority:	Standard	Application Received:	07/09/2015

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: Pennsylvania

Certification(s)/Specialty: Internal Medicine, Hospice & Palliative 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 63 year old male deputy sheriff who sustained an industrial injury on 04/10/2002 when a bullet fragment hit him in the left forearm/wrist damaging the nerve and artery at which time the injured worker was noted to have an old inferior myocardial infarction on Electrocardiogram (EKG). The injured worker was diagnosed with coronary artery disease, diabetes mellitus, hypertension and overweight. The injured worker is status post left hand surgery in April 2012 and cardiac catheterization with placement of three stents in 2004. Treatment to date has included diagnostic testing with echocardiogram, electrocardiogram (EKG), stress test, carotid arterial Doppler ultrasound, laboratory blood work, weight control, dietary restrictions and medications. According to the primary treating physician's progress report on December 29, 2014, the injured worker was evaluated for routine follow-up. Cardiac status was stable. The injured worker denied angina and shortness of breath. There was no dependent edema noted. Current medications are listed as Atorvastatin 40mg, Amlodipine/Benazepril, Hydrochlorothiazide, Actos Januvia, Metformin HCL and Welchol. Treatment plan consists of continuing with medication regimen, weight loss with decreased saturated fats and cholesterol, decreased sodium intake, increase aerobic activity, regular walking, limit alcohol content and the current request for Clopidogrel 75mg.

IMR ISSUES, DECISIONS AND RATIONALES

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

Clopidogrel 75mg, #90 with 1 refill: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation US National Library of Medicine/National Institutes of Health Medline Plus last revised 11/15/2014.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Clopidogrel: Drug information. Topic 8921, version 151.0. UpToDate, accessed 08/15/2015.

Decision rationale: Clopidogrel is a medication in the thienopyridine anti-platelet class. The MTUS Guidelines are silent on this issue. Clopidogrel is FDA-approved for the treatment of unstable heart-associated chest pain, heart attacks, artery disease in the limbs, and recent stroke. There is also research to support its use after certain procedures that restore blood flow in a limb or heart artery, narrowing of the major neck artery when the person is symptomatic, after a specific type of surgery to restore blood flow in the major artery in the neck, before certain procedures to restore blood flow in a heart artery when the person is allergic to aspirin or has a major gastrointestinal side effect to it, and to treat stable heart artery disease. The submitted and reviewed documentation concluded the worker was suffering from heart disease with a history of a heart attack, high blood pressure, high cholesterol, low thyroid function, and diabetes in the past. However, no recent clinical records were submitted for review, and the presence of more recent side effects and complications could not be assessed to determine continued medical need. For this reason, the current request for 90 tables of clopidogrel 75mg with one refill is not medically necessary.