

Case Number:	CM15-0140965		
Date Assigned:	07/30/2015	Date of Injury:	02/09/2011
Decision Date:	08/28/2015	UR Denial Date:	07/03/2015
Priority:	Standard	Application Received:	07/20/2015

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: California

Certification(s)/Specialty: Emergency 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 57 year old female, who sustained an industrial injury on 2-9-11 Initial complaints were of her right shoulder and back injury. The injured worker was diagnosed as having lumbar disc displacement; cervical disc degeneration; lumbosacral spondylosis; thoracic disc degeneration; chronic pain syndrome; cervicalgia; lumbago; other back symptoms; back disorder NOS; lumbosacral spondylosis; acquired spondylolisthesis; cervical disc displacement; lumbosacral neuritis NOS. Treatment to date has included physical therapy; medications. Diagnostics studies included Abdominal Ultrasound (3-25-15). Currently, the PR-2 notes dated 4-28-15 indicated the injured worker was in this office for an internal medicine consultation follow-up. She is having on and off abdominal pains that is worse with taking pain medications. She is having nausea and vomiting from her Gabapentin prescribed by her primary physician. The Protonix is helping the stomach. She also reports having some joint pains on and off in multiple areas. Anti-inflammatory medications have been tried with only some success. Activities worsen the pain and sometimes rest alleviates the discomfort. Medications are listed as Norco, Montelukast, and Ondansetron, Spiriva with hand inhaler and inhalation capsules and Advair discus inhalation. An Ultrasound of the Abdomen notes the liver is normal and the provider feels no further evaluation is needed. The provider documents a physical examination and notes the generalized joint pain in multiple joints with mild inflammation and range of motion as normal. She has muscle weakness and arthralgia diffuse. Her epigastric - abdominal symptoms were reviewed and recommended to avoid spicy foods, take medications as prescribed, avoid smoking and alcohol, elevate the head of the bed and avoid carbonated beverages and weight loss. The provider is requesting authorization of Infection Panel and Zyrtec 10mg #30.

IMR ISSUES, DECISIONS AND RATIONALES

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

Infection panel: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines specific drug list & adverse effects, Page 70 Page(s): 70.

Decision rationale: The requested Infection panel is not medically necessary. Chronic Pain Medical Treatment Guidelines, NSAIDS, specific drug list & adverse effects, Page 70, note, "Package inserts for NSAIDs recommend periodic lab monitoring of a CBC and chemistry profile (including liver and renal function tests). There has been a recommendation to measure liver 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 injured worker has abdominal pains that are worse with taking pain medications. She is having nausea and vomiting from her Gabapentin prescribed by her primary physician. The Protonix is helping the stomach. She also reports having some joint pains on and off in multiple areas. Anti-inflammatory medications have been tried with only some success. Activities worsen the pain and sometimes rest alleviates the discomfort. Medications are listed as Norco, Montelukast, and Ondansetron, Spiriva with hand inhaler and inhalation capsules and Advair discus inhalation. An Ultrasound of the Abdomen notes the liver is normal and the provider feels no further evaluation is needed. The provider documents a physical examination and notes the generalized joint pain in multiple joints with mild inflammation and range of motion as normal. She has muscle weakness and arthralgia diffuse. Her epigastric - abdominal symptoms were reviewed and recommended to avoid spicy foods, take medications as prescribed, avoid smoking and alcohol, elevate the head of the bed and avoid carbonated beverages and weight loss. The treating physician has not documented the constituent labs in this request, nor their medical necessity. The criteria noted above not having been met, Infection panel is not medically necessary.

Zyrtec 10mg #30: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation www.zrytec.com.

Decision rationale: The requested Zyrtec 10 mg # 30 is medically necessary. CA MTUS and ODG are silent. www.zrytec.com noted the use of this anti-histamine for upper airway allergic reactions. The injured worker has abdominal pains that are worse with taking pain medications.

She is having nausea and vomiting from her Gabapentin prescribed by her primary physician. The Protonix is helping the stomach. She also reports having some joint pains on and off in multiple areas. Anti-inflammatory medications have been tried with only some success. Activities worsen the pain and sometimes rest alleviates the discomfort. Medications are listed as Norco, Montelukast, and Ondansetron, Spiriva with hand inhaler and inhalation capsules and Advair discus inhalation. An Ultrasound of the Abdomen notes the liver is normal and the provider feels no further evaluation is needed. The provider documents a physical examination and notes the generalized joint pain in multiple joints with mild inflammation and range of motion as normal. She has muscle weakness and arthralgia diffuse. Her epigastric - abdominal symptoms were reviewed and recommended to avoid spicy foods, take medications as prescribed, avoid smoking and alcohol, elevate the head of the bed and avoid carbonated beverages and weight loss. The treating physicians have documented the presence of COPD findings. The criteria noted above having been met, Zyrtec 10mg #30 is medically necessary.