

<b>Case Number:</b>	CM15-0146213		
<b>Date Assigned:</b>	08/07/2015	<b>Date of Injury:</b>	09/02/2011
<b>Decision Date:</b>	09/03/2015	<b>UR Denial Date:</b>	07/17/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/28/2015

### 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 58-year-old male who sustained an industrial injury on 9-2-11 from a lifting incident that resulted in low back pain. He currently complains of lumbar and right hip pain. On physical exam, there was improved range of motion at the right hip; tenderness to palpation of right lower lumbar spine with decreased range of motion; positive pain on facet loading and tenderness to palpation of facets bilaterally. He has had a fall due to pain and inability to lift his leg. His function and quality of life were limited (per 10-14-14 note). Medication was tramadol. Diagnoses include sacroiliitis; lumbago; enthesopathy of hip region; unspecified neuralgia, neuritis and radiculitis. Treatments to date include medication; physical therapy; home exercise program. Diagnostics include MRI of the lumbar spine 5-16-14 revealed facet joint hypertrophy at L4-5 and L5-S1 bilaterally and minimal disc bulge; MRI of the right hip (8-19-14) showing evidence of anterior-superior labral tear. On 7-17-15, Utilization Review evaluated a request for medical clearances to include history and physical, electrocardiogram and labs.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Medical Clearance: History & Physical: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), [www.odg-twc.com](http://www.odg-twc.com); Section: Low Back - Lumbar & Thoracic (Acute & Chronic).

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.brighamandwomens.org/gms/Medical/preopprotocols.aspx>.

**Decision rationale:** The requested Medical Clearance: History & Physical is not medically necessary. CA Medical Treatment Utilization Schedule (MTUS), the American College of Occupational and Environmental Medicine (ACOEM) Occupational Medicine Practice Guidelines, APG I Plus, 2009 and Official Disability Guidelines are silent regarding this request. <http://www.brighamandwomens.org/gms/Medical/preopprotocols.aspx> noted: "Patients greater than age 40 require a CBC; males require an ECG if greater than age 40 and females if greater than age 50; this is for any type of surgery. b. Patients having major neurosurgical, abdominal, orthopedic, thoracic, cardiac, or vascular surgery usually require an ECG, CXR, lytes, bun, creatinine, LFT's, and PT/PTT. Refer to the preoperative form for lab testing indications for less major procedures. c. Patients having artificial material inserted (e.g. joint replacements) require a urine analysis and culture. d. Patients less than age 40 who are not in categories b or c do not require laboratory testing. "The injured worker has lumbar and right hip pain. On physical exam, there was improved range of motion at the right hip; tenderness to palpation of right lower lumbar spine with decreased range of motion; positive pain on facet loading and tenderness to palpation of facets bilaterally. He has had a fall due to pain and inability to lift his leg. The injured worker has been approved for medial branch blocks. However, this procedure does not require medical clearance or pre-op labs, and the treating physician has not sufficiently documented the presence of high surgical risk factors or significant co-morbidities. The criteria noted above not having been met, Medical Clearance: History & Physical is not medically necessary.

**Medical Clearance: EKG:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), [www.odg-twc.com](http://www.odg-twc.com); Section: Low Back - Lumbar & Thoracic (Acute & Chronic).

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.brighamandwomens.org/gms/Medical/preopprotocols.aspx>.

**Decision rationale:** The requested Medical Clearance: EKG, is not medically necessary. CA Medical Treatment Utilization Schedule (MTUS), the American College of Occupational and Environmental Medicine (ACOEM) Occupational Medicine Practice Guidelines, APG I Plus, 2009 and Official Disability Guidelines are silent regarding this request. <http://www.brighamandwomens.org/gms/Medical/preopprotocols.aspx> noted: "Patients greater than age 40 require a CBC; males require an ECG if greater than age 40 and females if greater than age 50; this is for any type of surgery. b. Patients having major neurosurgical, abdominal, orthopedic, thoracic, cardiac, or vascular surgery usually require an ECG, CXR, lytes, bun, creatinine, LFT's, and PT/PTT. Refer to the preoperative form for lab testing indications for less major procedures. c. Patients having artificial material inserted (e.g. joint replacements) require a urine analysis and culture. d. Patients less than age 40 who are not in categories b or c do not require laboratory testing. "The injured worker has lumbar and right hip pain. On physical

exam, there was improved range of motion at the right hip; tenderness to palpation of right lower lumbar spine with decreased range of motion; positive pain on facet loading and tenderness to palpation of facets bilaterally. He has had a fall due to pain and inability to lift his leg. The injured worker has been approved for medial branch blocks. However, this procedure does not require medical clearance or pre-op labs, and the treating physician has not sufficiently documented the presence of high surgical risk factors or significant co-morbidities. The criteria noted above not having been met, Medical Clearance: EKG is not medically necessary.

**Medical Clearance: Labs:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), [www.odg-twc.com](http://www.odg-twc.com); Section: Low Back - Lumbar & Thoracic (Acute & Chronic).

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.brighamandwomens.org/gms/Medical/preopprotocols.aspx>.

**Decision rationale:** The requested Medical Clearance: labs, is not medically necessary. CA Medical Treatment Utilization Schedule (MTUS), the American College of Occupational and Environmental Medicine (ACOEM) Occupational Medicine Practice Guidelines, APG I Plus, 2009 and Official Disability Guidelines are silent regarding this request. <http://www.brighamandwomens.org/gms/Medical/preopprotocols.aspx> noted: "Patients greater than age 40 require a CBC; males require an ECG if greater than age 40 and females if greater than age 50; this is for any type of surgery. b. Patients having major neurosurgical, abdominal, orthopedic, thoracic, cardiac, or vascular surgery usually require an ECG, CXR, lytes, bun, creatinine, LFT's, and PT/PTT. Refer to the preoperative form for lab testing indications for less major procedures. c. Patients having artificial material inserted (e.g. joint replacements) require a urine analysis and culture. d. Patients less than age 40 who are not in categories b or c do not require laboratory testing. "The injured worker has lumbar and right hip pain. On physical exam, there was improved range of motion at the right hip; tenderness to palpation of right lower lumbar spine with decreased range of motion; positive pain on facet loading and tenderness to palpation of facets bilaterally. He has had a fall due to pain and inability to lift his leg. The injured worker has been approved for medial branch blocks. However, this procedure does not require medical clearance or pre-op labs, and the treating physician has not sufficiently documented the presence of high surgical risk factors or significant co-morbidities. The criteria noted above not having been met, Medical Clearance: labs is not medically necessary.