

Case Number:	CM15-0160277		
Date Assigned:	08/26/2015	Date of Injury:	11/18/2013
Decision Date:	09/29/2015	UR Denial Date:	07/21/2015
Priority:	Standard	Application Received:	08/17/2015

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: Tennessee, Florida, Ohio
 Certification(s)/Specialty: Surgery, Surgical Critical Care

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This 60 year old male sustained an industrial injury on 11-18-13. He subsequently reported back pain. Diagnoses include inguinal hernia. Treatments to date include abdominal surgery and prescription pain medications. The injured worker continues to experience difficulty with right and left hernia. Upon examination, there was swelling to the right of the laparotomy scar noted. A request for 1 pre op testing to include history and exam, 1 pre op testing PT and PTT, 1 pre op testing EKG, 1 pre op testing CBC and 1 pre op testing CMP was made by the treating physician.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 pre op testing to include history and exam: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Surgery general information and ground rules, California Official medical fee schedule, 1999 edition, pages 92-93.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Back Pain, Preoperative testing, general.

Decision rationale: There is sufficient clinical information provided to justify the medical necessity of a history and physical exam for this patient. The California MTUS guidelines and the ACOEM Guidelines do not address the topic of preoperative lab testing. According to the Official Disability Guidelines (ODG), pre-operative History and Physical is: "for the purpose of determining fitness for anesthesia and identifying patients at high risk of postoperative complications." This patient has a complex medical history with multiple surgeries for bowel perforation, ischemia, peritonitis and exploratory laparotomy. It is necessary to assess this patient's fitness for anesthesia and his risk of postoperative complications. Thus, based on the submitted medical documentation, medical necessity for a History and Physical has been established. The request is medically necessary.

1 pre op testing PT and PTT: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Surgery general information and ground rules, California Official medical fee schedule, 1999 edition, pages 92-93.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Preoperative Lab Testing.

Decision rationale: There is not sufficient clinical information provided to justify the medical necessity of PT/PTT testing for this patient. The California MTUS guidelines and the ACOEM Guidelines do not address the topic of preoperative lab testing. According to the Official Disability Guidelines (ODG), pre-operative medical clearance is: "Preoperative additional tests are excessively ordered, even for young patients with low surgical risk, with little or no interference in perioperative management. Laboratory tests, besides generating high and unnecessary costs, are not good standardized screening instruments for diseases. The decision to order preoperative tests should be guided by the patient's clinical history, comorbidities, and physical examination findings." Per ODG, "Coagulation studies are reserved for patients with a history of bleeding or medical conditions that predispose them to bleeding, and for those taking anticoagulants." A review of the medical documentation provided demonstrates that this patient does not have any active medical conditions. He does not take any anticoagulants or have any known bleeding disorders. Thus, based on the submitted medical documentation, medical necessity for PT/PTT testing has not been established. The request is not medically necessary.

1 pre op testing EKG: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Cardr, Sawyer M, Degnan B, Harder K, Kemper J, Marshall M, Matteson M, Roemer R, Schuller-Bebus G, Swanson C, Stultz W, Terrell C, varela N. Perioperative protocol. Health care protocol. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2014 Mar. 124 p. Centers for Medicare and Medicaid Services, Physician fee schedule search<http://www.cms.gov/apps/physician-fee-schedule/overview.aspx>.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Back Pain, preoperative ECG.

Decision rationale: There is sufficient clinical information provided to justify the medical necessity of EKG testing for this patient. The California MTUS guidelines and the ACOEM Guidelines do not address the topic of preoperative lab testing. According to the Official Disability Guidelines (ODG), pre-operative EKG is: "Necessary for patients undergoing high or intermediate risk surgical procedures." Hernia repair is considered an intermediate risk surgical procedure due to intraperitoneal manipulation of the hernia sac and contents. Additionally, this patient is over the age of 50 with risk factors for coronary artery disease. Thus, based on the submitted medical documentation, medical necessity for EKG testing has been established. The request is medically necessary.

1 pre op testing CBC: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Cardr, Sawyer M, Degnan B, Harder K, Kemper J, Marshall M, Matteson M, Roemer R, Schuller-Bebus G, Swanson C, Stultz W, Terrell C, varela N. Perioperative protocol. Health care protocol. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2014 Mar. 124 p.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG, Preoperative Lab Testing.

Decision rationale: There is sufficient clinical information provided to justify the medical necessity of CBC testing for this patient. The California MTUS guidelines and the ACOEM Guidelines do not address the topic of preoperative lab testing. According to the Official Disability Guidelines (ODG), pre-operative medical clearance is: "The decision to order preoperative tests should be guided by the patient's clinical history, comorbidities, and physical examination findings." Per ODG, "A complete blood count is indicated for patients with diseases that increase the risk of anemia or patients in whom significant perioperative blood loss is anticipated." A review of the medical documentation provided demonstrates that this patient is to have a recurrent inguinal hernia repair. Inguinal hernia repair involves reimplantation of new mesh to close the inguinal defect and resect the hernia sac. Hernia repair occurs directly above the femoral artery and vein. The procedure has the potential for excessive perioperative blood loss. Thus, based on the submitted medical documentation, medical necessity for CBC testing has been established. The request is medically necessary.

1 pre op testing CMP: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Surgery general information and ground rules, California Official medical fee schedule, 1999 edition, pages 92-93.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Back Pain, Preoperative Lab Testing.

Decision rationale: There is not sufficient clinical information provided to justify the medical necessity of CMP testing for this patient. The California MTUS guidelines and the ACOEM Guidelines do not address the topic of preoperative lab testing. According to the Official Disability Guidelines (ODG), pre-operative medical clearance is: "excessively ordered, even for young patients with low surgical risk, with little or no interference in perioperative management. Laboratory tests, besides generating high and unnecessary costs, are not good standardized screening instruments for diseases. The decision to order preoperative tests should be guided by the patient's clinical history, comorbidities, and physical examination findings." Per ODG, "Electrolyte and creatinine testing should be performed in patients with underlying chronic disease and those taking medications that predispose them to electrolyte abnormalities or renal failure." A review of the medical documentation provided demonstrates that this patient does not have any active, uncontrolled medical conditions. A CMP provides unnecessary and excessive testing in comparison to a BMP. Inguinal hernia repair will not affect the foregut. The patient's liver does not have known hepatitis or cholestasis. Thus, based on the submitted medical documentation, medical necessity for CMP testing has not been established. The request is not medically necessary.