

<b>Case Number:</b>	CM15-0162018		
<b>Date Assigned:</b>	08/28/2015	<b>Date of Injury:</b>	02/18/2010
<b>Decision Date:</b>	10/05/2015	<b>UR Denial Date:</b>	08/07/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/18/2015

### 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, New York, 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 applicant is a represented 42-year-old who has filed a claim for neck and low back pain reportedly associated with an industrial injury of February 18, 2010. In a Utilization Review report dated August 7, 2015, the claims administrator does approve a request for laboratory testing ordered on or around June 22, 2015. The claims administrator did not seemingly cite any guidelines in its determination. The applicant's attorney subsequently appealed. The said June 22, 2015 progress was notable for commentary to the effect the applicant exhibited 5 to 6/10 low back and neck pain complaints status post earlier cervical spine surgery on October 23, 2014. The applicant was on Norco, Xanax, Paxil, Ambien, and Lipitor, it was reported. Multiple medications and laboratory testing were endorsed. The applicant's work status was not clearly stated, although it did not appear that the applicant was working.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Retrospective laboratory medpanel tests to include complete blood count (CBC) for DOS 6/22/2015:** Overturned

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints.

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

**Decision rationale:** Yes, the request for laboratory testing to include a CBC ordered on June 26, 2015 was medically necessary, medically appropriate, and indicated here. As noted on page 70 of the MTUS Chronic Pain Medical Treatment Guidelines, routine suggested laboratory monitoring of applicants on NSAIDs includes periodic assessment of CBC and chemistry profile, while the applicant was not seemingly using NSAIDs, the applicant was, however, using variety of other medications to include Norco, Xanax, Paxil, Ambien, and Lipitor. Assessing the applicant's hematologic function via the CBC in question was indicated to ensure that the same was compatible with currently prescribed medications. Therefore, the request was medically necessary.

**Retrospective laboratory medpanel tests to include comprehensive metabolic panel (CMP) for DOS 6/22/15:** Overturned

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints.

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

**Decision rationale:** Similarly, the request for laboratory testing to include a comprehensive metabolic panel (CMP) was likewise medically necessary, medically appropriate, or indicated here. As noted on page 70 of the MTUS Chronic Pain Medical Treatment Guidelines, routine suggested laboratory monitoring of applicants on NSAIDs include periodic assessment of an applicant's CBC and chemistry profile to include liver and function testing. Here, while the applicant was not using NSAIDs, the applicant was using a variety of medications processed in the liver and kidneys, including Norco, Xanax, Paxil, Ambien, Lipitor, etc. Obtaining the CMP at issue was, thus, indicated to ensure that the applicant's current levels of renal and hepatic function were consistent with currently prescribed medications. Therefore, the request was medically necessary.