

Case Number:	CM15-0219409		
Date Assigned:	11/12/2015	Date of Injury:	04/08/2013
Decision Date:	12/30/2015	UR Denial Date:	10/15/2015
Priority:	Standard	Application Received:	11/09/2015

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: 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 [REDACTED] beneficiary who has filed a claim for bilateral foot pain reportedly associated with an industrial injury of April 8, 2013. On a Utilization Review report dated August 15, 2015, the claims administrator failed to approve a request for a 2D echocardiogram. The claims administrator referenced an August 4, 2015 office visit in its determination. The applicant's attorney subsequently appealed. On a handwritten note dated August 5, 2015, the applicant was placed off work, on total temporary disability through August 9, 2015. Work restrictions were subsequently imposed, although the treating provider acknowledged that the applicant's employer was unable to accommodate said limitations. On a handwritten note dated August 4, 2015, difficult to follow, not entirely legible, the 2D echocardiogram in question was ordered to "rule out end-organ damage." The applicant's blood pressure was relatively well controlled at 132/76. The applicant apparently was given diagnoses of hypertension and obesity, the treating provider reported. The treating provider stated that the applicant had responded favorably to introduction of previously prescribed Tenormin.

IMR ISSUES, DECISIONS AND RATIONALES

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

2D Echo with Doppler: Upheld

Claims Administrator guideline: Decision based on MTUS Ankle and Foot Complaints 2004, Section(s): Special Studies.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation British Society of Echocardiography [http://www.bsecho.org/indications-for-echocardiography/indications for echocardiography 14](http://www.bsecho.org/indications-for-echocardiography/indications-for-echocardiography-14) Hypertension 14.2 Not indicated, a. Routine assessment, b. Repeat assessment of LV function in asymptomatic patients, c. Repeat assessment for LV mass regression.

Decision rationale: No, the request for a 2D echocardiogram was not medically necessary, medically appropriate, or indicated here. The MTUS does not address the topic. However, the British Society of Echocardiography (BSE) notes that echocardiography is "not indicated" in the routine assessment of left ventricular systolic function in asymptomatic applicants. Here, the handwritten August 4, 2015 office visit made no mention of the applicant is having any issues with chest pain, shortness of breath, or the like. The applicant's hypertension, by all accounts, thus, was seemingly asymptomatic. The treating provider failed to furnish a clear or compelling rationale for pursuit of echocardiography in a seemingly asymptomatic individual in the face of the unfavorable BSE position on the same. Therefore, the request was not medically necessary.