

Case Number:	CM15-0222407		
Date Assigned:	11/18/2015	Date of Injury:	06/16/2012
Decision Date:	12/31/2015	UR Denial Date:	10/21/2015
Priority:	Standard	Application Received:	11/12/2015

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:

The injured worker is a 43 year old female, who sustained an industrial injury on 6-16-2012. The medical records indicate that the injured worker is undergoing treatment for a 3 to 4 millimeter disc protrusion of the lumbosacral spine. According to the progress report dated 10-2-2015, the injured worker presented with complaints of low back pain with radiation into her bilateral legs. On a subjective pain scale, she rates her pain 3 out of 10. The physical examination of the lumbar spine reveals tightness and spasm in the paraspinal musculature, bilaterally, limited range of motion, and positive straight leg raise test. The current medications are not indicated. Previous diagnostic studies include MRI of the lumbar spine. Treatments to date include medication management, physical therapy, and epidural steroid injection (50% relief). Work status is described as temporarily totally disabled. The treatment plan included lumbar epidural steroid injection of L4-5 with laboratory testing prior to injection for clearance. The original utilization review (10-21-2015) had non-certified a request for basic metabolic panel, prothrombin time, partial thromboplastin time with international normalized ratio, and complete blood count.

IMR ISSUES, DECISIONS AND RATIONALES

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

Basic metabolic panel: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back, Preoperative lab testing.

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

Decision rationale: There is not sufficient clinical information provided to justify the medical necessity of BMP 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, 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 medical conditions. She does not take any medications and has not been documented to have abnormal values on prior metabolic panel testing. Thus, based on the submitted medical documentation, medical necessity for BMP testing has not been established, therefore is not medically necessary.

Prothrombin time: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back, Preoperative lab testing.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Back, 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. She does not take any anticoagulants or have any known bleeding disorders. Thus, based on the submitted medical documentation, medical necessity for PT testing has not been established, therefore is not medically necessary.

Partial thromboplastin time with international normalized ratio: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back, Preoperative lab testing.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Back, 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. She does not take any anticoagulants or have any known bleeding disorders. Thus, based on the submitted medical documentation, medical necessity for INR/PTT testing has not been established, therefore is not medically necessary.

Complete blood count: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back, Preoperative lab testing.

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

Decision rationale: There is not 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. Anticoagulants. A review of the medical documentation provided demonstrates that this patient is to have an epidural steroid injection. The procedure does not have the potential for excessive perioperative blood loss and the patient is not on anticoagulants. Thus, based on the submitted medical documentation, medical necessity for CBC testing has not been established, therefore is not medically necessary.