

Case Number:	CM15-0041504		
Date Assigned:	03/11/2015	Date of Injury:	01/19/2014
Decision Date:	04/14/2015	UR Denial Date:	01/23/2015
Priority:	Standard	Application Received:	03/04/2015

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: District of Columbia, Virginia
Certification(s)/Specialty: Internal 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 68 year old male injured worker suffered an industrial injury on 1/19/2014. The diagnoses were degenerative arthritis of the right knee, hypertension and diabetes. The diagnostic studies were right and left knee magnetic resonance imaging and x-rays of both knees. The treatments were right knee arthroscopy, injections and physical therapy. The treating provider reported buckling, weakness, and instability along with crepitus. The joint was tender and laxity of both knees. The request was for pre-operative clearance laboratory testing and diagnostics.

IMR ISSUES, DECISIONS AND RATIONALES

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

Pre Op Clearance with Electrocardiography (EKG), Labs-Renal Function Panel, Complete Blood Count (CBC) with Diff, Prothrombin Time (PT), Partial Thromboplastin Time (PTT): Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Treatment in Workers Comp 18th edition, 2013 Updates, chapter low back Pre-op testing.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://emedicine.medscape.com/article/285191-overview#aw2aab6b3>.

Decision rationale: ACOEM and MTUS do not address this issue specifically so alternate guidelines were sought. Routine preoperative testing (preoperative screening) of healthy people undergoing elective surgery is not recommended. Instead, a selective strategy, as outlined above, is safe and cost-effective as long as a complete history and physical examination are obtained. Based on the available evidence, the authors recommend the following preoperative tests: Hemoglobin level for major surgery with significant expected blood loss or in patients 65 years or older, Serum creatinine level for people older than 50 years, Pregnancy testing in all reproductive-age group women, ECG in patients undergoing high-risk surgery (eg, vascular surgery) or intermediate-risk surgery and with at least one risk factor, CXR in patients older than 60 years. No laboratory test must be repeated if results were normal within 4 months of the surgery and no change in the patient's clinical status occurred. Per review of the clinical data provided, the patient has multiple co-morbidities and was anticipating surgery. Preoperative diagnostic clearance would be appropriate.