

Case Number:	CM14-0170656		
Date Assigned:	10/23/2014	Date of Injury:	05/12/2009
Decision Date:	11/24/2014	UR Denial Date:	09/15/2014
Priority:	Standard	Application Received:	10/15/2014

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. The expert reviewer is Board Certified in Occupational Medicine and is licensed to practice in California. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

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] employee who has filed a claim for shoulder pain reportedly associated with an industrial injury of May 12, 2009. Thus far, the applicant has been treated with the following: Analgesic medications; transfer of care to and from various providers in various specialties; multiple prior shoulder surgeries; and platelet-rich plasma injection therapy. In a Utilization Review Report dated September 15, 2014, the claims administrator denied a request for preoperative renal function testing. The rationale was sparse to minimal. The claims administrator stated that it was basing its denial for renal function testing on the grounds that the surgery at issue had not been approved. The applicant was 57 years old, the claims administrator noted. In an October 30, 2014 progress note, the applicant reported ongoing complaints of shoulder pain. The applicant was doing poorly. The applicant was using tramadol for pain relief. The applicant reported limited usage of the left upper extremity. Significantly limited shoulder range of motion was noted on exam. The applicant was given multiple medication refills, including Naprosyn, Cymbalta, Elavil, and Tramadol. The applicant was placed off of work, on total temporary disability. The attending provider stated that a surgical remedy was warranted here. In an October 1, 2014 progress note, the applicant was again placed off of work, on total temporary disability. The applicant was using Elavil, Cymbalta, Naprosyn, Prilosec, and Tramadol. The applicant was placed off of work, on total temporary disability. Authorization for surgery was sought. Laboratory testing, including urine drug testing, was seemingly sought.

IMR ISSUES, DECISIONS AND RATIONALES

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

(Outpatient) Pre-operative Renal Function Panel, PT & 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, low back procedure, Preoperative electrocardiogram (ECG)

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs, Specific Drug Lists and Adverse Effects topic Page(s): 70. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence
<http://emedicine.medscape.com/article/285191-overview#showall>

Decision rationale: While the MTUS does not specifically address the topic of pre-operative renal function testing, page 70 of the MTUS Chronic Pain Medical Treatment Guidelines does acknowledge that periodic laboratory monitoring in applicants using NSAIDs includes CBC testing, renal function testing, and hepatic function testing. In this case, the applicant is, in fact, using Naprosyn, an NSAID medication, along with several other medications which are processed in the kidneys. Obtaining the applicant's renal function testing is indicated, whether done preoperatively or postoperatively. Similarly, Medscape's Preoperative Testing article notes that renal function testing is recommended in all applicants older than 50 years of age who are planning to undergo elective surgery. In this case, the applicant is 57 years of age and is planning to undergo an elective surgery. While Medscape notes that PT and PTT testing is not recommended for routine preoperative testing/preoperative screening purposes, obtaining the applicant's renal function testing is indicated here as obtaining the renal function testing at issue is preferable to not obtaining said testing, even if it involves concurrently testing the applicant's PT and PTT, which are not routinely recommended by Medscape for preoperative screening purposes. Therefore, the request is medically necessary.