

<b>Case Number:</b>	CM14-0094553		
<b>Date Assigned:</b>	07/25/2014	<b>Date of Injury:</b>	11/19/2008
<b>Decision Date:</b>	10/16/2014	<b>UR Denial Date:</b>	05/21/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/20/2014

### 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 Physical Medicine and Rehabilitation and is licensed to practice in Nevada. 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 records presented for review indicate that this 48-year-old male was reportedly injured on November 19, 2008. The most recent progress note, dated May 8, 2014, indicates that the injured employee's acid reflux is reduced, his hypertension is stable, and that diarrhea is less frequent. There was a normal physical examination on this date with a blood pressure of 130/78. Diagnostic imaging studies were not reviewed during this visit. Previous treatment includes left elbow surgery, physical therapy, cortisone injections, and oral medications. A request had been made for Aspirin 81 mg, Anusol HC ointment, and an ophthalmology consult and was not certified in the pre-authorization process on May 21, 2014.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**ASA 81mg #45 with 2 refills:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Antiplatelet Therapy. Decision based on Non-MTUS Citation Official Disability Guidelines: Diabetes

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: <http://www.nlm.nih.gov/medlineplus/druginfo/meds/a682878.html>

**Decision rationale:** Aspirin is commonly prescribed to reduce the risk of death in people who are experiencing a heart attack or to prevent ischemic strokes in people who have had a stroke in the past however it has no role associated with blood pressure. Additionally, the injured employee is demonstrated to have blood pressure well-controlled. Considering this, the request for aspirin is not medically necessary.

**Anusol HC Ointment with 2 refills:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation WebMD

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: <http://www.nlm.nih.gov/medlineplus/druginfo/meds/a682793.html>

**Decision rationale:** A review of the medical record indicates that the injured employee has had a prior history of hemorrhoids and bright red blood per rectum; however, there has been no recent report of this. As such, this request for Anusol HC ointment is not medically necessary.

**Ophthalmology Consultation:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 92. Decision based on Non-MTUS Citation MTUS: ACOEM, Chapter 7; Official Disability Guidelines: Eye Chapter (Office Visits)

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: <http://www.nlm.nih.gov/medlineplus/ency/article/000999.htm>

**Decision rationale:** The injured employee has been diagnosed with hypertension which is now under control. High blood pressure can damage the blood vessels in the retina of the eyes. It is unclear from the medical record if and when the injured employee has had a prior ophthalmology examination. Without this information a recommendation for an ophthalmology consultation cannot be made. Considering this, the request for an ophthalmology consultation is not medically necessary..