

Case Number:	CM14-0211242		
Date Assigned:	12/24/2014	Date of Injury:	07/20/2014
Decision Date:	02/20/2015	UR Denial Date:	11/21/2014
Priority:	Standard	Application Received:	12/17/2014

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. 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, California
 Certification(s)/Specialty: Family Practice

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This is a 60 years old male patient who sustained an injury on 7/20/2014. He sustained the injury while he was picking up trash after a party in one of the gardens when he punctured his left thumb with a hypodermic needle. The current diagnoses include abdominal pain, acid reflux, chest pain, cephalgia and sleep disorder. Per the doctor's note dated 10/8/2014, he had complaints of left thumb; chest pressure, abdominal pain, dizziness, nausea (due to medications prescribes); depression, anxiety, loss of sexual desire, fatigue, sleeping difficulties and headache due to stress over his injury and the possibility of contracting infections and disease. The physical examination revealed BP- 101/62 mmHg, pulse 73/minute, normal cardiac, respiratory and abdominal examination. The medications list includes simvastatin, ibuprofen, methocarbamol and tylenol. He has had lumbar spine X-rays. He has had multiple blood tests. Prior diagnostic study or laboratory reports were not specified in the records provided.

IMR ISSUES, DECISIONS AND RATIONALES

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

Impedance cardiography: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.ncbi.nlm.nih.gov/pubmed/3087687>

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: PubMed Recent developments in cardiac output determination by bioimpedance: comparison with invasive cardiac output and potential cardiovascular applications. Moshkovitz Y, Kaluski E, Milo O, Vered Z, Cotter G *Curr Opin Cardiol.* 2004;19(3):229. Cardiology Department, Assaf-Harofeh Medical Center, Zerifin, Israel. Bench to bedside: electrophysiologic and clinical principles of noninvasive

Decision rationale: MTUS Guidelines and ODG do not address this request. Per the cited references "In a few preliminary studies bioimpedance-determined cardiac output was found useful in the diagnosis, risk stratification, and treatment titration of some cardiovascular conditions. Further, larger prospective studies are required to determine the true independent value of cardiac output measurement by bioimpedance for the evaluation of cardiovascular diseases and especially heart failure." Per the doctor's note dated 10/8/2014, he had complaints of chest pressure, abdominal pain, dizziness, nausea due to medications prescribed. The physical examination revealed BP- 101/62 mmHg, pulse 73/minute, normal cardiac, respiratory and abdominal examination. A detailed cardiac examination with significant objective findings are not specified in the records provided. Results of preliminary tests like EKG, CBC, before performing impedance cardiography is not specified in the records provided. The medical necessity of Impedance cardiography is not established for this patient.