

Case Number:	CM14-0061025		
Date Assigned:	07/09/2014	Date of Injury:	08/05/2003
Decision Date:	06/05/2015	UR Denial Date:	04/08/2014
Priority:	Standard	Application Received:	05/01/2014

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: Pennsylvania

Certification(s)/Specialty: Internal Medicine, Hospice & Palliative 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 injured worker is a 46-year-old female patient who sustained an industrial injury on 08/05/2003. She had initial complaint of left knee and right ankle pain. A psychological evaluation dated 09/18/2013 reported the patient with current complaint of bilateral knee pain, bilateral foot pain, bilateral shoulder pain, bilateral wrist pain. Current medications are: Flexeril, Norco 10/325mg, Aleve, Protonix, Celexa, and Tylenol. The following psychiatric diagnoses are applied: depressive disorder; generalized anxiety disorder; pain disorder; and carpal tunnel syndrome, knee pain, pain in joint lower leg, hip bursitis, and shoulder pain. She has completed 8 sessions of physical therapy and reported finding them somewhat helpful. The plan of care involved: recommending individual behavioral counseling. A primary treating office visit dated 04/24/2014 reported the patient with subjective complaints of pain that she rated an 8 out of 10 in intensity without use of medications. Her quality of sleep is poor. Current medications are: Flexeril, Norco 10/325mg, Aleve, and Ambien.

IMR ISSUES, DECISIONS AND RATIONALES

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

Prospective request for 1 CBC with platelets, metabolic panel, CRP and white counts:

Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines
Lab: Med panel to evaluate hepatic and renal function.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS.
Decision based on Non-MTUS Citation Chemistry panels.

Decision rationale: The MTUS Guidelines are silent on this issue in this clinical situation. A metabolic panel is a group of laboratory blood tests that generally look at the salt balance in the blood, blood sugar level, kidney function, and/or liver function. A complete blood count (CBC) is a panel of laboratory blood tests that look closely at the components of the blood in several different ways. Platelets are elements in the blood that aid in clotting to stop bleeding. White blood cells are elements in the blood that help to fight infection, among other functions. A C-reactive protein (CRP) is a nonspecific laboratory blood test that looks at inflammation or swelling in the body. It can increase when there is physical stress on the body, such as with infection or certain blood vessel issues. The submitted and reviewed documentation indicated the worker was experiencing left leg, shoulder, and knee pain. The worker was taking medications that require occasional monitoring to maintain safety. However, there was no discussion specifying the type of metabolic panel requested, suggesting the reason the white blood cell count and CRP were needed, or describing special circumstances that sufficiently supported this request. In the absence of such evidence, the current request for a CBC with platelets and white blood cell count, an unspecified metabolic panel, and a CRP is not medically necessary.