

Case Number:	CM14-0074206		
Date Assigned:	07/16/2014	Date of Injury:	05/20/2012
Decision Date:	05/27/2015	UR Denial Date:	04/23/2014
Priority:	Standard	Application Received:	05/21/2014

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: California, Indiana, New York
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 injured worker is a 58 year old male, who sustained an industrial injury on 5/20/2012, after being pinned between two trucks. The injured worker was diagnosed as having post- concussion syndrome, cervical sprain/strain, thoracic sprain/strain, anxiety/depression, and hypertension. Treatment to date has included diagnostics, chiropractic, and medications. On 3/17/2014, the injured worker complains of chronic left shoulder pain secondary to tendinosis and residual low back pain. His blood pressure was 118/85 and heart rate was 41. His hypertension was documented as currently under control. Medications included Atenolol 50mg twice daily, HCTZ, Tylenol ES, and Capsaicin gel. Medication refills were requested.

IMR ISSUES, DECISIONS AND RATIONALES

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

Atenolol 50 mg #60: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Diabetes (Type 1, 2, and Gestational).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) <http://www.nlm.nih.gov/medlineplus/druginfo/meds/a684031.html>.

Decision rationale: Pursuant to Medline plus, Atenolol 50 mg #60 is not medically necessary. Atenolol is used alone or in combination with other medications to treat high blood pressure. It is also used to prevent angina and improve survival after heart attack. Atenolol is a beta blocker. For additional details, see the attached link. In this case, the injured worker's working diagnoses are post concussion syndrome; cephalgia; sprain/strain cervical spine, thoracic spine and lumbosacral spine; multilevel lumbar disc protrusion bilateral foraminal stenosis; degenerative disc disease; contusion anterior chest wall; fracture left fourth, fifth and sixth ribs; contusion/sprain left shoulder; rotator cuff tendinosis left shoulder; contusion/sprain left elbow; contusion/sprain left wrist; degenerative joint disease left wrist; insomnia, anxiety/depression, hypertension and fatigue syndrome secondary generalized pain disorder. The request for authorization is dated April 21, 2014. The documentation indicates the injured worker was taking atenolol as far back as November 15, 2013. There is no documentation indicating hypertension is work related. A progress note dated March 17, 2014 does not contain subjective complaints referencing hypertension or uncontrolled hypertension. Objectively, blood pressure is 115/85. There are no physical findings related to ongoing hypertension. There is no clinical documentation establishing a causal relationship to hypertension and the industrial injury. Consequently, absent clinical documentation establishing a causal relationship of hypertension to the ongoing industrial injury, Atenolol 50 mg #60 is not medically necessary.