

Case Number:	CM15-0117912		
Date Assigned:	06/26/2015	Date of Injury:	08/26/2003
Decision Date:	07/27/2015	UR Denial Date:	06/11/2015
Priority:	Standard	Application Received:	06/18/2015

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 8/26/2003. He reported injury to his lumbar spine and right shoulder while employed as a journeyman brick tender. The injured worker was diagnosed as having left cervical radiculopathy and spinal stenosis, lumbar strain and radiculopathy, right shoulder strain, left shoulder pain, insomnia, erectile dysfunction, and high blood pressure. Treatment to date has included diagnostics, modified work, chiropractic, home exercise, and medications. Currently, the injured worker complains of cervical spine pain and bilateral shoulder pain, rated 7/10, and lumbar spine pain, rated 8/10. It was noted that his medications were not being filled, other than Viagra, due to increased pain and increased difficulty with activities of daily living. He continued to do home exercise and wear a back brace, which he found helpful for mitigating his pain. He reported erectile dysfunction due to chronic pain. His work status remained permanent and stationary. The treatment plan included liver and renal function tests. It was noted that prior liver and renal function testing was approved on 3/26/2015 (not submitted).

IMR ISSUES, DECISIONS AND RATIONALES

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

Liver Function Test: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines History and physical assessments Page(s): 5-6.

Decision rationale: Pursuant to the Chronic Pain Medical Treatment Guidelines, liver function testing is not medically necessary. Thorough history taking is always important in the clinical assessment and treatment planning for the patient with chronic pain and includes a review of medical records. Clinical recovery may be dependent on identifying and addressing previously unknown or undocumented medical or psychosocial issues. A thorough physical examination is also important to establish/confirm diagnoses and observe/understand pain behavior. The history and physical examination serves to establish reassurance and patient confidence. Diagnostic studies should be ordered in this context and community is not simply for screening purposes. In this case, the injured worker's working diagnoses are left cervical radiculopathy; lumbar strain of lumbar radiculopathy; right shoulder strain; left shoulder pain; insomnia chronic pain; erectile dysfunction; and hypertension. The date of injury is August 26, 2003. The earliest progress note by the treating provider is dated December 9, 2014. The injured worker takes Viagra, but discontinued Norco, Flexeril, Lisinopril and Ambien. There was no change in a progress note dated March 9, 2015 or the most recent progress note dated May 12, 2015. Subjectively, the injured worker has neck, low back, shoulder pain with sleeping difficulties and erectile dysfunction. The injured worker was taking Viagra, and, as noted above, was not taking Norco, Flexeril, lisinopril or Ambien. There was no clinical rationale in the medical record for liver function testing. Consequently, absent clinical documentation with a clinical indication and rationale for liver function testing in the absence of ongoing opiates, muscle relaxes, antihypertensives and sleeping medications, liver function testing is not medically necessary.

Renal Function Test: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines History and physical assessments Page(s): 5-6.

Decision rationale: Pursuant to the Chronic Pain Medical Treatment Guidelines, renal functional testing is not medically necessary. Thorough history taking is always important in the clinical assessment and treatment planning for the patient with chronic pain and includes a review of medical records. Clinical recovery may be dependent on identifying and addressing previously unknown or undocumented medical or psychosocial issues. A thorough physical examination is also important to establish/confirm diagnoses and observe/understand pain behavior. The history and physical examination serves to establish reassurance and patient confidence. Diagnostic studies should be ordered in this context and community is not simply for screening purposes. In this case, the injured worker's working diagnoses are left cervical radiculopathy; lumbar strain of lumbar radiculopathy; right shoulder strain; left shoulder pain; insomnia chronic pain; erectile dysfunction; and hypertension. The date of injury is August 26, 2003. The earliest progress note by the treating provider is dated December 9, 2014. The injured worker takes Viagra, but discontinued Norco, Flexeril, Lisinopril and Ambien. There was no change in a progress note dated March 9, 2015 or the most recent progress note dated May 12, 2015. Subjectively, the injured worker has neck, low back, shoulder pain with sleeping difficulties and erectile dysfunction. The injured worker was taking Viagra, and, as noted above,

was not taking Norco, Flexeril, lisinopril or Ambien. There was no clinical rationale in the medical record for renal function testing. Consequently, absent clinical documentation with a clinical indication and rationale for renal function testing in the absence of ongoing opiates, muscle relaxants, antihypertensives and sleeping medications, renal function testing is not medically necessary.