

Case Number:	CM15-0142354		
Date Assigned:	08/03/2015	Date of Injury:	08/22/2009
Decision Date:	10/02/2015	UR Denial Date:	06/25/2015
Priority:	Standard	Application Received:	07/22/2015

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, Oregon, Washington
 Certification(s)/Specialty: Orthopedic Surgery

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 male who sustained an industrial injury on August 22, 2009 resulting in pain in his right elbow, right grip weakness, and numbness in the 4th and 5th fingers of his right hand. He was diagnosed with bilateral cubital tunnel syndrome. Documented treatment has included physical therapy and medication but the injured worker continues to present with pain, weakness, and numbness of the right upper extremity. The treating physician's plan of care includes pre-operative procedures associated with right ulnar neurolysis and transposition including CBC, HIV test, Chem20, Hepatitis A, B, and C tests, PSA, EKG, urinalysis, and history and physical. Work status is permanent and stationary.

IMR ISSUES, DECISIONS AND RATIONALES

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

Pre-operative lab CBC: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Low Back.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) low back.

Decision rationale: CA MTUS/ACOEM is silent on the issue of preoperative lab testing. ODG low back is referenced. Guidelines for preoperative CBC are stated as patients with a medical risk for anemia or a planned surgery with significant blood loss. For testing of metabolic panel or creatinine, the guidelines recommend testing for patients with chronic kidney disease. Based on the clinic notes provided, there is not supporting evidence of the above, therefore the requested procedure is not medically necessary.

Pre-operative lab Chem20: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Low Back.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) low back.

Decision rationale: CA MTUS/ACOEM is silent on the issue of preoperative lab testing. ODG low back is referenced. Guidelines for preoperative CBC is stated as patients with a medical risk for anemia or a planned surgery with significant blood loss. For testing of metabolic panel or creatinine, the guidelines recommend testing for patients with chronic kidney disease. Based on the clinic notes provided, there is not supporting evidence of the above, therefore the requested procedure is not medically necessary.

Pre-operative lab HIV: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Low Back.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) low back.

Decision rationale: CA MTUS/ACOEM is silent on the issue of preoperative lab testing. ODG low back is referenced. Guidelines for preoperative CBC is stated as patients with a medical risk for anemia or a planned surgery with significant blood loss. For testing of metabolic panel or creatinine, the guidelines recommend testing for patients with chronic kidney disease. There is no indication for HIV tests or hepatitis testing. There is no indication for PSA testing in this healthy 46-year-old male. Based on the clinic notes, there is not supporting evidence of the above, therefore the requested procedure is not medically necessary.

Pre-operative lab Hep A, Hep B, Hep C: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Low Back.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) low back.

low back is referenced. Guidelines for preoperative CBC are stated as patients with a medical risk for anemia or a planned surgery with significant blood loss. For testing of metabolic panel or creatinine, the guidelines recommend testing for patients with chronic kidney disease. There is no indication for HIV testing or hepatitis testing. There is no indication for PSA testing in this healthy 46-year-old male. Based on the clinic notes, there is not supporting evidence of the above, therefore the requested procedure is not medically necessary.

Pre-operative lab PSA: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Low Back.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) low back.

Decision rationale: CA MTUS/ACOEM is silent on the issue of preoperative lab testing. ODG low back is referenced. Guidelines for preoperative CBC are stated as patients with a medical risk for anemia or a planned surgery with significant blood loss. For testing of metabolic panel or creatinine, the guidelines recommend testing for patients with chronic kidney disease. There is no indication for HIV tests or hepatitis testing. There is no indication for PSA testing in this healthy 46-year-old male. Based on the clinic notes, there is not supporting evidence of the above, therefore the requested procedure is not medically necessary.

Associated surgical service: History and Physical: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.guideline.gov/content.aspx?id=48408>.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) elbow section.

Decision rationale: CA MTUS/ACOEM is silent on the issue of surgery for cubital tunnel syndrome. According to the ODG, Elbow section, Surgery for cubital tunnel syndrome, indications include exercise, activity modification, medications and elbow pad and or night splint for a 3-month trial period. In this case, the surgery itself has been approved and thus a preoperative history and physical is necessary.

Pre-operative EKG: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Low Back.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) low back.

Decision rationale: CA MTUS/ACOEM is silent on the issue of preoperative clearance and testing. ODG, Low back, Preoperative testing general, is utilized. This chapter states that preoperative testing is guided by the patient's clinical history, comorbidities and physical examination findings. ODG states, "These investigations can be helpful to stratify risk, direct anesthetic choices, and guide postoperative management, but often are obtained because of

protocol rather than medical necessity. The decision to order preoperative tests should be guided by the patient's clinical history, comorbidities and physical examination findings. Patients with signs or symptoms of active cardiovascular disease should be evaluated with appropriate testing, regardless of their preoperative status." Preoperative ECG in patients without known risk factor for coronary artery disease, regardless of age, may not be necessary. CBC is recommended for surgeries with large anticipated blood loss. Creatinine is recommended for patient with renal failure. Electrocardiography is recommended for patients undergoing high risk surgery and those undergoing intermediate risk surgery who have additional risk factors. Patients undergoing low risk surgery do not require electrocardiography. Based on the information provided for review, there is no indication of any of these clinical scenarios present in this case. In this case the patient is a healthy 46 year old without comorbidities or physical examination findings concerning to warrant preoperative testing prior to the proposed surgical procedure. Therefore, the determination is for non-certification.

Pre-operative urinalysis: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Low Back.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines
Page(s): 94-95.

Decision rationale: Per the CA MTUS Chronic Pain Medical Treatment Guidelines pages 94-95, use of urine toxicology is encouraged particularly when opioids are prescribed. It states, "Opioids, steps to avoid misuse/addiction. The following are steps to avoid misuse of opioids, and in particular, for those at high risk of abuse: a) Opioid therapy contracts. See Guidelines for Pain Treatment Agreement. b) Limitation of prescribing and filling of prescriptions to one pharmacy. c) Frequent random urine toxicology screens." In this case, there is insufficient evidence of chronic opioid use or evidence of drug misuse to warrant urine toxicology. In addition, multiple drug screens were obtained in the cited records. Therefore, the determination is for non-certification.