

<b>Case Number:</b>	CM15-0178634		
<b>Date Assigned:</b>	09/18/2015	<b>Date of Injury:</b>	03/17/2014
<b>Decision Date:</b>	10/28/2015	<b>UR Denial Date:</b>	09/03/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/10/2015

### 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: 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:

The injured worker is a 66-year-old female who sustained an industrial injury on 3-17-14. The injured worker reported shortness of breath and ankle edema. A review of the medical records indicates that the injured worker is undergoing treatments for hypertension and weight disorder. Treatment has included Furosemide, Atenolol, Potassium, and Lipitor. Objective findings dated 7-1-15 were notable for no abnormal swelling, tenderness, masses to extremities and abdomen. Medical records dated 7-1-15 indicated the injured workers blood pressure as "Normal at 120 over 60". The original utilization review (9-3-15) denied a request for a consultation and evaluation in a weight disorder clinic. The patient has had history of HTN, weight disorder, gout, ankle edema and GERD. The patient has had ECG on 7/1/15 that revealed poor R wave V1 - V6. The patient sustained the injury due to cumulative trauma. The medication list includes Enablex. The patient had a weight of 289 pound and height 5.2 feet. Other therapy done for this injury was 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:

**Consult and Evaluation in a weight disorder clinic:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Occupational Medicine Practice Guidelines, 2nd Edition, 2004, page 127.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) Chapter 7, IME and consultations.

**Decision rationale:** Per the cited guidelines, "The occupational health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial factors are present, or when the plan or course of care may benefit from additional expertise." The injured worker reported shortness of breath and ankle edema. The patient is undergoing treatments for hypertension and weight disorder. Objective findings dated 7-1-15 were notable for no abnormal swelling, tenderness, masses to extremities and abdomen. The patient has had history of HTN, weight disorder, gout, ankle edema and GERD. The patient has had ECG on 7/1/15 that revealed poor R wave V1 - V6. The patient has had weight of 289 pound and height 5.2 feet. Therefore, this complex case and the management of this case would be benefited by a Consult and Evaluation in a weight disorder clinic. The request for Consult and Evaluation in a weight disorder clinic is medically necessary and appropriate for this patient.