

<b>Case Number:</b>	CM15-0062752		
<b>Date Assigned:</b>	04/21/2015	<b>Date of Injury:</b>	12/29/2010
<b>Decision Date:</b>	06/22/2015	<b>UR Denial Date:</b>	02/27/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	04/02/2015

### 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: 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 52 year old female, who sustained an industrial injury on 12/29/10. She reported injuries sustained after a slip and fall at work. The injured worker was diagnosed as having malignant hypertension with left atrial enlargement, sleep disorder and abnormal EKG. Treatment to date has included oral medications. Currently, the injured worker complains of elevated blood pressure. Physical exam noted elevated blood pressure and normal heart rate and rhythm. The treatment plan included laboratory studies, (CT) computerized tomography scan of the abdomen, EKG, 2D echo with Doppler, stress echo, cardio respiratory testing and a kidney ultrasound and prescriptions for HCTZ, Amlodipine, Atenolol, ASA, Bystolic and Clonidine patches.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Clonidine patches 0.3 mg #6:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation [www.drugs.com/pro/clonidine-injection.html](http://www.drugs.com/pro/clonidine-injection.html).

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Not addressed. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Addresses Clonidine Intrathecal only and Other Medical Treatment Guidelines <http://www.nlm.nih.gov/medlineplus/> <http://www.uptodate.com/contents/clonidine-drug->.

**Decision rationale:** Transdermal clonidine is recommended alone or in combination with other medications to treat Hypertension. Clonidine is not recommended for use as first line agent. Documentation provided reveals that the injured worker is diagnosed with Hypertension that is at suboptimal control on current medication regimen. The ongoing use of Clonidine is reasonable and appropriate to maximize medical management. The request for Clonidine patches 0.3 mg #6 is medically necessary per guidelines.

**Fasting labs HTN, UA, A1C:** 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 Not addressed. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Addresses Preoperative Lab Testing and Other Medical Treatment Guidelines <http://smartmedicine.acponline.org/content>.

**Decision rationale:** The American College of Physicians identifies patients with acute severe hypertension (usually BP - 180/120 mm Hg, possibly lower levels in children and during pregnancy) as high-risk for imminent target organ damage or those presenting with new or ongoing target organ damage (hypertensive emergency). Per guidelines, EKG and lab tests, including serum electrolytes, creatinine, and lipid profile, and urinalysis, may be used to assess for target organ damage. Although the injured worker reported elevated outside Blood Pressure readings, Physician report at the time of the requested service under review revealed a Blood Pressure reading of 136/93, which is fairly controlled. Furthermore, documentation fails to address findings of previous urinalysis or acute illness to support the medical necessity for additional testing or diabetic screening. The request for Fasting labs HTN, UA, A1C is not medically necessary.

**Stress echo heart:** 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 Not addressed. Decision based on Non-MTUS Citation <http://www.acponline.org/http://www.uspreventiveservicestaskforce.org>.

**Decision rationale:** The U.S. Preventive Services Task Force (USPSTF) recommends against screening with resting or exercise Electrocardiogram (EKG) for the prediction of Coronary Heart Disease (CHD) events in asymptomatic adults at low risk for CHD events. The injured worker is

diagnosed with malignant hypertension with left atrial enlargement. Although the injured worker reported elevated outside Blood Pressure readings, Physician report at the time of the requested service under review revealed a Blood Pressure reading of 136/93, which is fairly controlled. Furthermore, documentation fails to show any objective finding of an acute illness that would justify additional cardiac testing. The request for Stress echo heart is not medically necessary.

**Kidney ultrasound:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation [ncbi.nlm.nih.gov/pubmed/11702120](http://ncbi.nlm.nih.gov/pubmed/11702120).

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Not addressed. Decision based on Non-MTUS Citation <http://smartmedicine.acponline.org/content>.

**Decision rationale:** The American College of Physicians recommends testing for secondary causes of hypertension in patients with acutely worsening hypertension, with very early onset of hypertension, or patients whose hypertension is difficult to control. Although the injured worker reported elevated outside Blood Pressure readings, Physician report at the time of the requested service under review revealed a Blood Pressure reading of 136/93, which is fairly controlled. Documentation fails to show acute worsening of the injured worker's hypertension or acute illness to support the medical necessity for additional cardiac testing. The request for Kidney ultrasound is not medically necessary.