

Case Number:	CM15-0092635		
Date Assigned:	05/19/2015	Date of Injury:	04/29/2014
Decision Date:	07/01/2015	UR Denial Date:	05/09/2015
Priority:	Standard	Application Received:	05/13/2015

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 Jersey, Alabama, California
 Certification(s)/Specialty: Neurology, Neuromuscular 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:

This 51 year old male sustained an industrial injury to the right shoulder, left knee, left heel, bilateral hips, neck and back on 4/29/14. Previous treatment included magnetic resonance imaging, physical therapy and medications. In an orthopedic evaluation dated 1/30/15, the injured worker complained of right shoulder pain with movement and reaching upward. Magnetic resonance imaging right shoulder (12/14/14) showed a full thickness supraspinatus tear and a high grade partial tear subscapularis and infraspinatus tendon. Current diagnoses included right shoulder subscapularis tear with medial subluxation of the biceps tendon, superior labral anterior posterior lesion and suprapinatus tendon tear. The physician recommended right shoulder arthroscopy, acromioplasty, biceps tenodesis and supraspinatus and subscapularis repair. On 2/13/15, a request for authorization was submitted for right shoulder surgery with associated surgical services including abduction pillow/sling, 12 sessions of postoperative physical therapy, electrocardiogram and laboratory studies.

IMR ISSUES, DECISIONS AND RATIONALES

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

Post-Operative Physical Therapy (12-sessions): Upheld

Claims Administrator guideline: Decision based on MTUS Postsurgical Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Physical Medicine Page(s): 98.

Decision rationale: According to MTUS guidelines, Physical Medicine is recommended as indicated below. Passive therapy (those treatment modalities that do not require energy expenditure on the part of the patient) can provide short term relief during the early phases of pain treatment and are directed at controlling symptoms such as pain, inflammation and swelling and to improve the rate of healing soft tissue injuries. They can be used sparingly with active therapies to help control swelling, pain and inflammation during the rehabilitation process. Active therapy is based on the philosophy that therapeutic exercise and/or activity are beneficial for restoring flexibility, strength, endurance, function, range of motion, and can alleviate discomfort. Active therapy requires an internal effort by the individual to complete a specific exercise or task. This form of therapy may require supervision from a therapist or medical provider such as verbal, visual and/or tactile instruction(s). Patients are instructed and expected to continue active therapies at home as an extension of the treatment process in order to maintain improvement levels. Home exercise can include exercise with or without mechanical assistance or resistance and functional activities with assistive devices. Patient-specific hand therapy is very important in reducing swelling, decreasing pain, and improving range of motion in CRPS. (Li, 2005) The use of active treatment modalities (e.g., exercise, education, activity modification) instead of passive treatments is associated with substantially better clinical outcomes. In a large case series of patients with low back pain treated by physical therapists, those adhering to guidelines for active rather than passive treatments incurred fewer treatment visits, cost less, and had less pain and less disability. The overall success rates were 64.7% among those adhering to the active treatment recommendations versus 36.5% for passive treatment. In this case, the patient has not been authorized to undergo right shoulder arthroscopy at this time. Therefore, the request for 12 sessions of post-operative physical therapy is not medically 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 Surgery General Information and Ground Rules, California Official Medical Fee Schedule, 1999 edition, pages 92-93.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Preoperative testing, general. <http://www.odg-twc.com/index.html>.

Decision rationale: This review presumes that a surgery is planned and will proceed. Pre-op EKG is medically necessary as a part of pre op work up. There is no medical necessity for this request if the surgery does not occur.

Associated Surgical Service: Abduction Pillow/Sling: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Shoulder (Acute & Chronic): Post-operative abduction pillow sling (2015).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Postoperative abduction pillow sling. <http://www.odg-twc.com/index.html>.

Decision rationale: According to ODG guidelines, postoperative abduction pillow sling recommended as an option following open repair of large and massive rotator cuff tears. The sling/abduction pillow keeps the arm in a position that takes tension off the repaired tendon. Abduction pillows for large and massive tears may decrease tendon contact to the prepared sulcus but are not used for arthroscopic repairs. In this case, the patient has not been authorized to undergo right shoulder arthroscopy at this time. Therefore, the request for Abduction pillow/sling is not medically necessary.

Pre-Operative Labs: CBC, CMP: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Surgery General Information and Ground Rules, California Official Medical Fee Schedule, 1999 edition, pages 92-93.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Wolverton, S. E. and K. Remlinger (2007). "Suggested guidelines for patient monitoring: hepatic and hematologic toxicity attributable to systemic dermatologic drugs." *Dermatol Clin* 25(2): 195-205, vi-ii.

Decision rationale: This review presumes that a surgery is planned and will proceed. Pre-Operative Labs: CBC, CMP is medically necessary as a part of pre op work up. There is no medical necessity for this request if the surgery does not occur.

Pre-Operative Labs: PT, PTT: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Surgery General Information and Ground Rules, California Official Medical Fee Schedule, 1999 edition, pages 92-93.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.labtestonline.org/>.

Decision rationale: This review presumes that a surgery is planned and will proceed. Pre-Operative Labs: PT, PTT is medically necessary as a part of pre op work up. There is no medical necessity for this request if the surgery does not occur.