

Case Number:	CM13-0041553		
Date Assigned:	12/20/2013	Date of Injury:	08/08/2013
Decision Date:	01/16/2015	UR Denial Date:	10/04/2013
Priority:	Standard	Application Received:	10/15/2013

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. The expert reviewer is Board Certified in Internal Medicine; Pulmonary Diseases, and is licensed to practice in California. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

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 31-year-old male who reported an injury on 08/08/2013. The injured worker reportedly suffered a chemical exposure while utilizing a propane gas powered machine to cut through cement. The current diagnoses include toxic exposure and headache. The injured worker presented on 10/01/2013 with complaints of constant severe headaches and constant severe ear pain. The physical examination revealed normal findings. It was noted that the injured worker was utilizing ear drops. Previous conservative management was not mentioned. A 24 hour holter monitor and echocardiogram with treadmill test was requested, as well as a referral to a neurologist and an ear specialist. There was no Request for Authorization form submitted for this review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Bronchodilation: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pulmonary Procedure Summary

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

Decision rationale: The Official Disability Guidelines state bronchodilators are current under study. There was no documentation of obstructed or restricted respiratory disease. There were no objective findings of pulmonary deficits. As the medical necessity has not been established, the request is not medically necessary.

Plethysmography: Upheld

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: California MTUS/ACOEM Practice Guidelines do not specifically address the requested service. Official Disability Guidelines do not specifically address the requested service. www.nlm.nih.gov. U.S. National Library of Medicine. U.S. Department of Health and Human Services National Institutes of Health. Plethysmography. Updated: 03 Dec 2014. Plethysmography is used to measure changes in volume in different parts of the body. This can help check blood. The test may be done to check for blood clots in the arms and legs, or to measure how much air you can hold in your lungs.

Decision rationale: According to the U.S. National Library of Medicine, plethysmography is used to measure changes in volume in different parts of the body. There is no documentation of any signs or symptoms of a DVT or circulatory/cardiopulmonary blockage. Therefore, the medical necessity for the requested study has not been established. As such, the request is not medically necessary.