

Case Number:	CM13-0002284		
Date Assigned:	12/18/2013	Date of Injury:	05/07/2013
Decision Date:	02/27/2014	UR Denial Date:	06/20/2013
Priority:	Standard	Application Received:	07/19/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Orthopedic Surgery, 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 physician 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 claimant is a 26-year-old gentleman who was injured on May 7, 2013 sustaining an injury to the right knee. The clinical records for review include an MRI report of the right knee from May 20, 2013 that shows severe osteochondral injury to the inferior half of the medial aspect of the patella with full thickness loss and secondary osteophyte formation with a large osteochondral loose body. The claimant's most recent clinical progress report for review is a June 7, 2013 assessment where he was noted to be with ongoing complaints of pain laterally. It stated this was an acute injury when stepping down awkwardly and now he is unable to extend his knee. Physical examination showed 5 to 120 degrees range of motion limited by pain with tenderness on the lateral joint line. MRI scan was reviewed including the evidence of large loose body. Based on the diagnosis of symptomatic loose body, surgical resection was recommended in the form of diagnostic arthroscopy and loose body removal.

IMR ISSUES, DECISIONS AND RATIONALES

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

Right knee arthroscopy removal of loose bodies: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Integrated Treatment/Disability Duration Guidelines - Knee (Acute and Chronic)

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints
Page(s): 343-345. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG),
Knee procedure

Decision rationale: MTUS Guidelines are silent regarding specific criteria for a diagnostic arthroscopy with loose body removal however they do support surgery in cases where there is clear imaging evidence of a lesion shown to benefit from surgical intervention. When looking at Official Disability Guideline criteria, the role of diagnostic arthroscopy is indicated if failed conservative care is noted and imaging is "inconclusive". The records in this case would support the need for operative arthroscopy. The claimant is noted to be with a large loose body as well as noted underlying degenerative change of the patella. While these would clearly be understood as preexisting, his symptoms became aggravated by work related injury from which he is now unable to extend the knee completely. Given his symptomatic findings including mechanical complaints to the knee that are consistent with his MRI findings, the role of surgical arthroscopy for the purpose of loose body removal would be indicated.