

<b>Case Number:</b>	CM13-0003732		
<b>Date Assigned:</b>	06/06/2014	<b>Date of Injury:</b>	04/24/2008
<b>Decision Date:</b>	07/28/2014	<b>UR Denial Date:</b>	07/17/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/29/2013

### 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 Physical Medicine & Rehabilitation, 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 injured worker is a 52 year old male who reported an injury on 04/24/2008 while pulling a cooler of drinks he stepped off the curb and his right knee popped. The injured worker had a history of right knee pain with diagnoses of derangement of lateral meniscus, unspecified, knee/leg sprain, osteoarthritis involving lower leg and obesity. The physical examination revealed the injured worker had a weight of 295 pounds from previous weight of 326 pounds, right knee with 2 plus pedal edema, positive patellar compression test with crepitus in both knees with flexion/extension, muscle strength to the lower extremities 4/5 and range of motion 0-115 degrees to the right knee. The medications included oxycodone 10 mg 2 tablets daily, Ambien 10 mg at night, gabapentin 300 mg 3 tabs daily, Motrin 800 mg 1 tab three times daily. The prior treatment included cane/walker for mobility assistance, dieting and pain medication. The treatment plan was weight reduction and follow up with orthopedic surgeon. The authorization form dated 11/12/2013 was submitted with documentation. The rationale was that the injured worker had a unique case in that he was unable to increase his activities and required weight loss for knee surgery.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Continued 10-Week Reduction Program and Additional 40 Boxes of Protein for Diet Supplementation for Weight Loss: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Diabetes Chapter, Lifestyle (diet & exercise) modifications.

**Decision rationale:** The request is for continued 10-week reduction program and additional 40 boxes of protein for diet supplementation for weight loss. The Official Disability Guidelines indicate lifestyle modifications to include diet and exercise are recommended as first-line interventions. The documentation provided indicated that the injured worker's weight was 260 pounds on 01/30/2013 and then his weight was 326 pounds on 02/19/2013 with a weight gain of 66 pounds in 20 days. At a subsequent visit on 04/26/2013, the injured worker had supervised medical weight loss and had lost 32 pounds and only needed 40 pounds to reach his goal. There is no indication that the injured worker would not be able to reach that goal with the knowledge obtained from the supervised medical weight loss. The injured worker's lower extremity motor strength is a 4/5 and is able to ambulate. As such, the request for 10 weeks of reduction program and additional boxes of protein for diet supplementation for weight loss is not medically necessary.