

Case Number:	CM13-0007669		
Date Assigned:	12/11/2013	Date of Injury:	09/25/2010
Decision Date:	02/06/2014	UR Denial Date:	07/08/2013
Priority:	Standard	Application Received:	08/07/2013

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 patient is a 38-year-old male who reported injury on 09/25/2010. The mechanism of injury was not provided. The patient was noted to have a prior knee injection that helped a lot. The patient was noted to have a pain level of 5/10. The patient was noted to have complaints of left knee pain getting worse. The diagnosis was noted to include reflex sympathetic dystrophy of the lower limb. The request was made for a Kenalog injection and anesthesia.

IMR ISSUES, DECISIONS AND RATIONALES

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

Left Knee Kenalog injection and anesthesia: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 2 General Approach to Initial Assessment and Documentation Page(s): 22.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 337.

Decision rationale: The ACOEM Guidelines do not recommend cortisone injections routinely. While it was noted the patient found the last cortisone injection to be beneficial, there was a lack of documentation indicating functional benefit from the injection and the duration the effect lasted. There was also a lack of documentation indicating the patient's necessity for anesthesia.

Given the above, the request for left knee Kenalog injection and anesthesia is not medically necessary and appropriate.