MAXIMUS Federal Services

Case Number:	CM13-0014861		
Date Assigned:	12/11/2013	Date of Injury:	04/12/2012
Decision Date:	01/17/2014	UR Denial Date:	08/13/2013
Priority:	Standard	Application Received:	08/22/2013

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.

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 31-year-old gentleman who was injured in a work related accident on April 12, 2012 sustaining an injury to the left knee. The clinical records for review specific to the left knee show prior imaging in the form of an MRI scan dated November 13, 2012 that shows moderate to severe degenerative changes to the medial meniscus with mild degenerative changes at the patellofemoral compartment and uncovering of the body of the lateral meniscus with questionable hypoplasia of the lateral femoral condyle. Recent clinical progress report for review is dated February 4, 2013 stating the claimant is with continued complaints of pain about the knee. He was seen at that time by [redacted]. His knee examination showed no atrophy, use of a cane with 0 to 134 degrees range of motion, stable with medial and lateral stressing, a positive patellar crunch test and a negative McMurray's test. The claimant was diagnosed on that date with a medial meniscal tear to the left knee based on MRI findings. He was referred to [redacted] to perform a left knee arthroscopy and partial medial meniscectomy. Follow-up assessment of [redacted] of April 30, 2013 showed physical examination to not document the claimant's left knee. The only notes at that time were in regards to the claimant's left foot injury. Specific recommendations regarding surgical process were not given. There is no indication of further clinical records for review. There is a request at present for a left knee arthroscopy.

IMR ISSUES, DECISIONS AND RATIONALES

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

Left knee arthroscopy: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 344.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 344-345.

Decision rationale: The MTUS/ACOEM Guidelines indicate that a left knee arthroscopy would not be indicated. While arthroscopic meniscectomy usually has a high success rate, its clinical presentation needs to be based on clear evidence on examination and consistent findings on a magnetic resonance imaging (MRI). The claimant's MRI demonstrated significant signal change consistent with a degenerative tear to the meniscus with no obvious acute findings. The knee examination for review also fails to demonstrate acute findings of a mechanical nature with a negative McMurray's test noted at last physical examination for review. Based on the claimant's MRI, clinical picture and lack of examination findings, the support for a left knee arthroscopy cannot be given at this time.