

Case Number:	CM13-0021462		
Date Assigned:	01/15/2014	Date of Injury:	09/16/2009
Decision Date:	04/09/2014	UR Denial Date:	08/14/2013
Priority:	Standard	Application Received:	09/09/2013

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 Orthopaedic 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:

This 65-year-old male product line worker for [REDACTED] sustained an industrial injury on 9/21/09. He reportedly tripped and fell forward landing on both knees and hands, directly onto his right knee. The 10/2/09 right knee MRI documented advanced medial compartment arthrosis with non-displaced fractures of the patella and tibial plateau and meniscal injury. The patient underwent right knee arthroscopic major synovectomy, medial meniscectomy, removal of multiple loose bodies, and chondroplasty of the patellofemoral joint for Grade II-IV chondromalacia on 4/1/10. X-rays taken 9/24/10 showed medial compartment end-stage osteoarthritis of the right knee and severe tri-compartmental osteoarthritis of the left knee. Records documented that the patient underwent viscosupplementation (series of 3) on three occasions: 12/13/10 - 12/29/10, 1/25/12 - 2/9/12, and 1/15/13 - 1/30/13. In each case, records documented moderate to severe pain with increasing difficulty tolerating full time work that improved to a tolerable pain level allowing for increased work tolerance. The 4/11/13 AME report recommended continuation of Synvisc injections. The patient wished to continue working and not have a knee replacement. The 7/31/13 orthopedic report documented mild limp, mild medial swelling, patellofemoral and medial compartment tenderness, functional range of motion, and difficulty squatting more than 25%. Previous viscosupplementation injections reportedly helped tremendously. A request for right knee Euflexxa injections was submitted.

IMR ISSUES, DECISIONS AND RATIONALES

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

A series of Euflexxa injections to the right knee: Overturned

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 Official Disability Guidelines (ODG) Knee and Leg, Hyaluronic Acid Injections

Decision rationale: The request under consideration is for a series of Euflexxa injections to the right knee. The California MTUS guidelines are silent with regard to the requested procedure. The Official Disability Guidelines recommend hyaluronic acid injections (three injections of Euflexxa) as an option for osteoarthritis. Guidelines indicate that a repeat series of injections may be reasonable if there is documented significant improvement in symptoms for 6 months or more, and symptoms recur. This patient has severe bone-on-bone, medial compartment osteoarthritis of the right knee. Prior viscosupplementation injection series are noted in the record on three occasions, with the last series completed 1/30/13. In each case, moderate to severe increasing right knee pain reduced to a tolerable level and allowed this patient to continue to work full time. The 7/31/13 treating physician report stated that these injections were tremendously helpful. Continued viscosupplementation was recommended in the 4/13/13 AME report. Guideline criteria have been met. Reasonable non-pharmacologic and pharmacologic (restricted activities, medications) had been tried and failed. Therefore, this request for a series of Euflexxa injections to the right knee is medically necessary.