

<b>Case Number:</b>	CM13-0022059		
<b>Date Assigned:</b>	08/07/2013	<b>Date of Injury:</b>	06/08/2012
<b>Decision Date:</b>	05/07/2014	<b>UR Denial Date:</b>	08/22/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/09/2013

### HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert 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 expert 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 46-year-old male who sustained a left knee injury in a work-related accident. The clinical records include a July 16, 2013, progress report indicating ongoing complaints related to the left knee, particularly the medial aspect. The report states that a recent course of physical therapy has been utilized. The physical examination shows 0 to 105 degree range of motion, 5/5 motor strength, tenderness over the patellar tendon at the inferior pole and pain over the medial retinaculum of the medial femoral condyle. The claimant was diagnosed with patellar tendinitis, left knee pain, status post subtotal meniscectomy. The recommendation was for PRP injection to the left patellar tendon, as well as continuation of Tramadol and Theramine.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**RETROSPECTIVE REQUEST FOR PRESCRIPTION OF THERAMINE #90, 1 TABLET TWICE A DAY:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG PAIN (updated 6/7/13), THERAMINE

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES (ODG) TREATMENT IN WORKER'S COMP, 18TH EDITION, 2013 UPDATES: KNEE PROCEDURE - PLATELET-RICH PLASMA (PRP)

**Decision rationale:** California MTUS Chronic Pain Guidelines do not address the requested treatment. Official Disability Guidelines criteria do not support the use of Theramine as it is a medical food used in the management of pain syndromes, including acute pain, chronic pain, fibromyalgia and neuropathic inflammatory issues. Official Disability Guidelines state that long-term, high-quality studies do not support Theramine's efficacy versus first-line treatment therapy regimen alone. The specific request for Theramine is not supported as medically necessary.

**PLATELET-RICH PLASMA(PRP) UNDER ULTRASOUND GUIDANCE TO LEFT KNEE:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG KNEE AND LEG (updated 6/7/13), PLATELET-RICH PLASMA

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES (ODG) TREATMENT IN WORKER'S COMP, 18TH EDITION, 2013 UPDATES: PAIN PROCEDURE - THERAMINE

**Decision rationale:** California MTUS and ACOEM Guidelines do not address platelet rich plasma (PRP) therapy. Official Disability Guidelines criteria do not support the use of PRP in the knee as only small clinical studies have shown improvements with injections at chronic refractory patellar tendinopathy; however, the treatment in and of itself is still under study and not formally recommended. Thus, PRP would not be medically necessary.