

Case Number:	CM13-0023259		
Date Assigned:	11/27/2013	Date of Injury:	10/19/2010
Decision Date:	03/18/2014	UR Denial Date:	08/23/2013
Priority:	Standard	Application Received:	09/12/2013

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. 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 46-year-old male who reported an injury on 10/19/2010. The mechanism of injury was noted to be the patient was driving a truck. The patient's diagnosis was noted to be unspecified internal derangement of the knee. The request was made for a pro-patella stabilizer brace for the left knee.

IMR ISSUES, DECISIONS AND RATIONALES

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

pro-patella stabilizer brace for the left knee: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints
Page(s): 339-340..

Decision rationale: ACOEM Guidelines indicate that a brace may be used for patellar instability, anterior cruciate ligament tear, or medial collateral ligament instability; however, usually a brace is necessary only if the patient is going to be stressing the knee under load such as climbing ladders or carrying boxes. The clinical documentation submitted for review failed to provide a physician's recent progress report and objective examination. As such, there is a lack of documentation indicating the patient would be stressing the knee under a load such as

climbing a ladder or carrying boxes. Given the above, the request for pro-patella stabilizer brace for the left knee is not medically necessary.