

Case Number:	CM13-0030838		
Date Assigned:	04/25/2014	Date of Injury:	08/23/2010
Decision Date:	07/07/2014	UR Denial Date:	08/28/2013
Priority:	Standard	Application Received:	09/30/2013

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 Neurology 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 patient is a 59-year-old man who sustained a work related injury on August 23, 2010. Subsequently, he developed chronic wrist and elbow pain. He was subsequently diagnosed with right wrist and forearm keloids scars. He underwent a keloid excision. According to a note dated on August 16, 2013, the patient showed some improvement for previous intralesion injection of steroids. However, his physical examination showed signs of recurrence of keloid. Topical ointment treatment failed to improve the patient. The provider requested authorization for Kenalog injections.

IMR ISSUES, DECISIONS AND RATIONALES

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

KENALOG INJECTION RIGHT WRIST X 2: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.ncbi.nlm.nih.gov/pubmed/9889433>;

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: (Ud-Din, Bowring et al. 2013).

Decision rationale: The guidelines state that additional administration of steroids cannot be received without objective documentation of improvement from previous injections. In the case, no improvement was shown after receiving previous intralesion injection of steroids following a standard protocol that required the administration of steroids for at least 3 consecutive sessions separated by six weeks. There is no objective documentation of improvement in the patient's file. Therefore, the requested injections are not medically necessary or appropriate at this time.