

Case Number:	CM13-0033890		
Date Assigned:	12/06/2013	Date of Injury:	05/24/2011
Decision Date:	02/21/2014	UR Denial Date:	09/25/2013
Priority:	Standard	Application Received:	10/11/2013

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 Anesthesiologist and Pain Medicine and is licensed to practice in Florida. 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 05/24/2011. The injury was noted to have occurred when the patient fell down a flight of stairs. The patient's diagnoses include status post right knee arthroscopy in 2012 and status post left knee arthroscopy in 2011. At the patient's orthopedic evaluation on 08/20/2013, the physical examination findings related to his bilateral knees included well-healed incisions to both knees and tenderness over the medial joint line bilaterally. All other objective findings were noted to be normal.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI of the left knee: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints
Page(s): 341-343.

Decision rationale: According to the American College of Occupational and Environmental Medicine (ACOEM) Guidelines, reliance on only imaging studies to evaluate the source of knee symptoms may carry a significant risk of diagnostic confusion because of the possibility of identifying the problem as present before the symptoms began. Despite this, the guidelines

indicate that while experienced examiners can usually diagnose an ACL tear in the acute stage based on history and physical, these injuries are commonly missed or over diagnosed by inexperienced examiners, making MRIs valuable in such cases. The clinical information submitted for review indicated that the patient does not have any significant objective findings in his bilateral knees aside from tenderness at the medial joint line. The patient has a history of arthroscopic surgeries to his bilateral knees. In the absence of significant clinical pathology or detailed indication for MRI studies, the request is not supported. As such, the request is non-certified.

MRI of the right knee: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints
Page(s): 341-343.

Decision rationale: According to the American College of Occupational and Environmental Medicine (ACOEM) Guidelines, reliance on only imaging studies to evaluate the source of knee symptoms may carry a significant risk of diagnostic confusion because of the possibility of identifying the problem as present before the symptoms began. Despite this, the guidelines indicate that while experienced examiners can usually diagnose an ACL tear in the acute stage based on history and physical, these injuries are commonly missed or over diagnosed by inexperienced examiners, making MRIs valuable in such cases. The clinical information submitted for review indicated that the patient does not have any significant objective findings in his bilateral knees aside from tenderness at the medial joint line. The patient has a history of arthroscopic surgeries to his bilateral knees. In the absence of significant clinical pathology or detailed indication for MRI studies, the request is not supported. As such, the request is non-certified.