

Case Number:	CM13-0033924		
Date Assigned:	12/06/2013	Date of Injury:	11/09/2010
Decision Date:	01/24/2014	UR Denial Date:	10/01/2013
Priority:	Expedited	Application Received:	10/14/2013

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 Physical Medicine and Rehabilitation, has a subspecialty in Neuromuscular Medicine and is licensed to practice in Maryland. 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.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

Pt is a 43 year young male who had a work related a acute injury to the right knee on November 9,2010 while on a ladder. The patient underwent a right knee arthroscopic surgery by [REDACTED] on November 28, 2011. Pt eventually underwent right knee anterior cruciate ligament reconstruction in May 2013. 7/24/13 MRI of R knee without contrast: CONCLUSION: Status post ACL repair which appears to be in good condition without evident complication by MRI criteria. 7/31/13 medical report states that the patient was doing well for the first 2 months after surgery with excellent stability, but then had rapid onset of instability and hyperextension in the knee, Diagnoses include anterior cruciate ligament insufficiency, right knee and sip anterior cruciate ligament reconstruction with patellar tendon allograft. The patient on (9/18/13) presented with continued right knee pain with increasing instability, with a feeling as if it wants to "give out". Physical examination revealed mild 1+ effusion., an apparent 2+Lachman's test and a 2+ pivot shift test for anterior cruciate ligament insufficiency, and medial and posteromedial joint line tenderness as well. Patient was diagnosed with a Failed anterior cruciate ligament reconstruction, right knee. The POSTOPERATIVE DIAGNOSIS: Failed anterior cruciate ligament reconstruction, right knee. PROCEDURES PERFORMED on 12/3/13:1. Revision anterior cruciate ligament reconstruction, right knee with bone patellar tendon bone autograft. 2. Right knee debridement.3. Removal of previous anterior cruciate ligament allograft implant. 4. Bone graft of the right patella. A request for for post-operative appointments within the global period with fluoroscopy was being made and denied. A request for a 2 week game ready was made and denied. Both of these requests are being appealed and the subject of this review.

IMR ISSUES, DECISIONS AND RATIONALES

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

2 week rental game ready unit: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 338. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Knee, Continuous flow cryotherapy, Game ready system

Decision rationale: The ODG states that continuous flow cryotherapy is: Recommended as an option after surgery, but not for nonsurgical treatment. Postoperative use generally may be up to 7 days, including home use."The request as written for a 2 week rental exceeds guideline recommendations and therefore is not medically necessary. Additionally, the treatment of a rental game ready unit is not medically necessary because ODG guidelines state that," The available scientific literature is insufficient to document that the use of continuous-flow cooling systems (versus ice packs) is associated with a benefit beyond convenience and patient compliance (but these may be worthwhile benefits) in the outpatient setting." Furthermore the ODG states," While there are studies on Continuous-flow cryotherapy, there are no published high quality studies on the Game Ready device or any other combined system.

3 post op visits with fluoroscopy: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG

MAXIMUS guideline: Decision based on MTUS Postsurgical Treatment Guidelines Page(s): 11 and 24. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Knee, Office Visits

Decision rationale: Three post op visits with fluoroscopy is not medically necessary per MTUS guidelines. Per guidelines patient is still within the post surgical period for his surgery and there is no documentation of extenuating circumstance that would require additional post op visits with fluoroscopy outside of the recommended post surgical time period.