

Case Number:	CM13-0037032		
Date Assigned:	03/03/2014	Date of Injury:	05/22/2012
Decision Date:	05/23/2014	UR Denial Date:	10/15/2013
Priority:	Standard	Application Received:	10/22/2013

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 43 year old claimant status post industrial injury 5/22/13. The claimant is status post left ankle arthroscopy on 8/5/13. The procedure performed was a left ankle arthroscopy with soft tissue distraction, excision of lateral osteochondral lesion of the talar dome with debridement and microfracture. During the ankle arthroscopic procedure on 8/5/13, intraoperative neuromonitoring was utilized.

IMR ISSUES, DECISIONS AND RATIONALES

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

INTRAOPERATIVE NEUROMONITORING DURING ANKLE ARTHROSCOPIC SURGERY: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation REV CHIRO ORTHOP REPARATIVE APPAR MOT. 2000 FEB;86(1):46-53 (JOURNAL ARTICLE).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES (ODG).

Decision rationale: The California MTUS/ACOEM guidelines are silent on the issue of neuromonitoring during ankle arthroscopy surgery. In addition, the ODG ankle section is silent on the issue. Alternative ODG Low Back guidelines was therefore utilized. Intraoperative

neuromonitoring is recommended during spinal or intracranial surgery, particularly with procedures at risk of complications. The procedure performed on 8/5/13 does not meet this criteria and therefore is non-certified.