

<b>Case Number:</b>	CM13-0044919		
<b>Date Assigned:</b>	12/27/2013	<b>Date of Injury:</b>	08/05/2011
<b>Decision Date:</b>	06/04/2014	<b>UR Denial Date:</b>	10/22/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/29/2013

### 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 Orthopedic Surgery, has a subspecialty in Hand 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 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 claimant is a 47-year-old who reported he sustained an injury to the left ankle on August 5, 2011 following a slip and fall injury. It appears the claimant was diagnosed with an injury to the left ankle. There is mention of the left ankle fracture. There is also mention of a left ankle arthroscopy with ligament reconstruction performed on March 1, 2012. Following the surgical intervention, postoperative physical therapy was initiated. The claimant has participated in 30+ physical therapy sessions postoperatively. The physical therapy progress note on July 31, 2012 documented 4-5/5 strength with resisted dorsiflexion and plantarflexion. Range of motion of the right and left ankle were compared and noted to be nearly symmetric. There was a 1° difference in dorsiflexion and a 2° difference in plantar flexion. Eversion was equal with testing of both ankles. A 4 degree difference was noted with inversion measurements. Physical therapy was continued through August 17, 2012 and no changes in range of motion measurements were documented. No significant gains in range of motion were noted with ongoing physical therapy.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**ADDITIONAL TWELVE PHYSICAL THERAPY SESSIONS FOR THE LEFT ANKLE:**  
Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Physical Medicine Section Page(s): 98-99.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints.

**Decision rationale:** Based on treatment guidelines, up to 34 post-operative physical therapy sessions are supported following surgical intervention for ankle sprain. Treatment is supported for up to six months after the surgical intervention. The claimant has already undergone 30+ physical therapy sessions for the ankle postoperatively. We are well outside of the six-month timeframe for postoperative physical therapy. The most recent objective physical examination findings of the claimant from October 2, 2013 documented the claimant was doing ankle range of motion and strengthening exercises at home. The claimant was noted not to progress due to recent back surgery. The claimant has already undergone extensive physical therapy and should be and appears to be well-versed on a home exercise program. There is no indication for ongoing formal physical therapy when previous formal physical therapy did not result in any significant improvement in range of motion with the most recently accomplished physical therapy progress reports are provided to be reviewed. The treating provider's request exceeds treatment guidelines and the treatment guideline time frames without any significant functional deficit documented. The previous non-certification was also based on the premise that the claimant was able to perform a home exercise program independently and ongoing formal physical therapy did not appear to be indicated. The request for physical therapy sessions for the left ankle, twice weekly for six weeks, is not medically necessary or appropriate.