

Case Number:	CM13-0045026		
Date Assigned:	12/27/2013	Date of Injury:	06/26/2013
Decision Date:	03/19/2014	UR Denial Date:	10/03/2013
Priority:	Standard	Application Received:	10/30/2013

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:

This is a 44-year-old gentleman who was been involved in an accident on 06/26/13 while sitting a tower on his knees. An MRI on 07/22/13 noted a median meniscal tear and effusion. It was noted that there was concern that the MRI may have been suboptimal as the tear was not clearly delineated on the films. Treatment to date has included medicines and physical therapy.

IMR ISSUES, DECISIONS AND RATIONALES

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

The request for right knee arthroscopy with possible partial meniscectomy: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints
Page(s): 343-345.

Decision rationale: These records do not document that a diagnostic injection was given within the joint space. In equivocal circumstances, injections may prove both diagnostic and therapeutic. These medical records do not support knee arthroscopy as the diagnosis is equivocal based on MRI and not supported by physical examination findings. It appears to be more patellofemoral in nature in review of these records.