

Case Number:	CM13-0047123		
Date Assigned:	12/27/2013	Date of Injury:	01/18/2008
Decision Date:	03/20/2014	UR Denial Date:	10/09/2013
Priority:	Standard	Application Received:	11/01/2013

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 & Rehabilitation, and is licensed to practice in Texas. 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 65-year-old male who reported an injury on 01/18/2008. The patient reportedly sustained an on-the-job injury as a result of repetitive work activities occurring from the 1980s until 2008. The patient is diagnosed with bilateral carpal tunnel syndrome, bilateral shoulder impingement syndrome, and right middle trigger finger. The patient was seen by [REDACTED] on 10/28/2013. Physical examination revealed triggering of the right middle finger, marked tenderness of the right middle finger along the A1 pulley, positive Phalen's testing bilaterally, positive Durkan's median compression testing bilaterally, and numbness in the thumb, index, and middle fingers. Treatment recommendations included right middle finger trigger release and right carpal tunnel release, postoperative analgesic medication including Vicodin ES #60, and postoperative physical therapy including 12 sessions, 3 times per week for approximately 2 months.

IMR ISSUES, DECISIONS AND RATIONALES

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

request for Postoperative Analgesic Medication: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 74-82.

Decision rationale: California MTUS Guidelines state a therapeutic trial of opioids should not be employed until the patient has failed a trial of non-opioid analgesics. Baseline pain and functional assessments should be made. Ongoing review and documentation of pain relief, functional status, appropriate medication use, and side effects should occur. As per the documentation submitted, there is no evidence of a failure to respond to non-opioid analgesics prior to the request for an opioid medication. The medical necessity for Vicodin ES #60 has not been established. Based on the clinical information received and the California MTUS Guidelines, the request is non-certified.

request for Postoperative Physical Therapy (12 sessions) three times a week for approximately two months: Upheld

Claims Administrator guideline: Decision based on MTUS Postsurgical Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Postsurgical Treatment Guidelines Page(s): 16 and 22.

Decision rationale: California MTUS Guidelines state the initial course of therapy means one half of the number of visits specified in the general course of therapy for the specific surgery in the postsurgical physical medicine treatment recommendations. Postsurgical treatment following trigger finger release includes 9 visits over 8 weeks. Postsurgical treatment following carpal tunnel release includes 3 to 8 visits over 3 to 5 weeks. The current request for 12 sessions of physical therapy, 3 times per week for 2 months greatly exceeds guideline recommendations. Therefore, the request is non-certified.