

Case Number:	CM13-0048929		
Date Assigned:	12/27/2013	Date of Injury:	04/15/2010
Decision Date:	05/02/2014	UR Denial Date:	11/06/2013
Priority:	Standard	Application Received:	11/06/2013

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 Neurology has a subspecialty in Neuromuscular Medicine 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:

██████████ is who sustained a work related injury on April 16 2010. Subsequently he developed a chronic right knee and ankle pain. According to a note dated on October 8 2013, the patient reinjured his right knee and ankle 2 weeks ago with soft tissue swelling. The patient physical examination showed pain on the manipulation of right knee and on pressure of the right ankle. The provider requested authorization of right knee and ankle MRI.

IMR ISSUES, DECISIONS AND RATIONALES

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

Repeat MRI OF RIGHT ANKLE: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 375.

Decision rationale: According to MTUS guidelines, MRI of the ankle is recommended in case of tendinitis, neuroma and ligament tear. There is no clinical evidence to support all these diagnosis. In addition the swelling may complicate the physical examination. It is recommended to reevaluate the patient after swelling resolution. Therefore, the request of right ankle MRI is not medically necessary.

REPEAT MRI OF RIGHT KNEE: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints.

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

Decision rationale: According to MTUS guidelines, MRI of the knee is indicated in case of meniscal tear, ligament strain and tendinitis. There is no clinical evidence suggesting a specific knee diagnosis. This is complicated by Knee swelling. It is recommended to reevaluate the patient after swelling resolution. Therefore, the request of right Knee MRI is not medically necessary.