

Case Number:	CM13-0052070		
Date Assigned:	03/31/2014	Date of Injury:	02/14/2013
Decision Date:	05/23/2014	UR Denial Date:	10/29/2013
Priority:	Standard	Application Received:	11/15/2013

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 Physical Medicine and Rehabilitation, has a subspecialty in Interventional Spine 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:

This is a 22 year-old male who was injured on 2/14/13. He has been diagnosed with right knee chondromalacia of the patella and sprain. According to the 10/17/13 orthopedic report from [REDACTED], the patient presents with moderate right knee pain that patient states is worsening. It is associated with swelling, clicking, locking, popping, grinding, stiffness, weakness and giving way. [REDACTED] notes ongoing patellofemoral pain and failure of cortisone injections and requests a Synvisc One injection. On 10/29/13 UR recommended non-certification for the Synvisc injection.

IMR ISSUES, DECISIONS AND RATIONALES

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

SYNVISC INJECTION, ONE TIME, TO RIGHT KNEE: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Knee Chapter, Injection Section

Decision rationale: The patient presents with right knee pain and has been diagnosed with chondromalacia of the patella. The California MTUS and ACOEM did not discuss Synvisc injections, so the Official Disability Guidelines (ODG) guidelines were consulted. ODG specifically states "Hyaluronic acid injections are not recommended for any other indications such as chondromalacia patellae, facet joint arthropathy, osteochondritis dissecans, or patellofemoral arthritis, patellofemoral syndrome (patellar knee pain), plantar nerve entrapment syndrome, or for use in joints other than the knee (e.g., ankle, carpo-metacarpal joint, elbow, hip, metatarso-phalangeal joint, shoulder, and temporomandibular joint) because the effectiveness of hyaluronic acid injections for these indications has not been established." The request for Synvisc One injection for chondromalacia patellae is not in accordance with ODG guidelines and thus, not medically necessary.