

<b>Case Number:</b>	CM13-0053749		
<b>Date Assigned:</b>	12/30/2013	<b>Date of Injury:</b>	09/08/2011
<b>Decision Date:</b>	03/11/2014	<b>UR Denial Date:</b>	11/11/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/18/2013

### 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 pain management, 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 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 62 year-old male who was injured on 9/8/2011. According to the 10/15/13 report from [REDACTED], the assessment is: tricompartmental grade 4 OA of the left knee; history of industrial injury to the left knee; s/p left knee arthroscopy on 8/17/12; Synvisc One for the left knee on 11/13/12 and July 2013; Kenalog to the left knee on 8/13/13. [REDACTED] recommended alternating Synvisc injections every 6 months with Kenalog injections in between as needed for flare-ups, noting the next Synvisc injection could be in January.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Synvisc one injection, Left knee:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines ODG Guidelines, "criteria for Hyaluronic acid injections".

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines ODG-TWC guidelines, Knee chapter for Hyaluronic acid injections. (<http://www.odg-twc.com/odgtwc/knee.htm#Hyaluronicacidinjections>)

**Decision rationale:** The 62 YO patient presents with left knee pain, from grade 4 tricompartmental OA and ACL tear, tenderness and crepitus. His last Synvisc injection was in July 2013. MTUS did not discuss Synvisc, so ODG guidelines were consulted. ODG guidelines state these injections are: "Recommended as a possible option for severe osteoarthritis for patients who have not responded adequately to recommended conservative treatments (exercise, NSAIDs or acetaminophen), to potentially delay total knee replacement" The patient has documented tricompartmental OA despite conservative treatment. The last Synvisc injection was on 7/22/13 and ODG states: "Repeat series of injections: If documented significant improvement in symptoms for 6 months or more, and symptoms recur, may be reasonable to do another series. No maximum established by high quality scientific evidence; see Repeat series of injections above." The physician stated the patient would be eligible for a repeat Synvisc injection in January (6-months from the July 2013 injection). The request appears to be in accordance with ODG guidelines.