

Case Number:	CM13-0056229		
Date Assigned:	12/30/2013	Date of Injury:	08/28/2013
Decision Date:	04/04/2014	UR Denial Date:	11/12/2013
Priority:	Standard	Application Received:	11/22/2013

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 Pennsylvania. 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 48 year old male with a diagnosis of a left knee medial meniscus tear. Arthroscopic treatment has been approved, and a request for deep vein thrombosis prophylaxis and prei-operative antibiotics for ten days has been made.

IMR ISSUES, DECISIONS AND RATIONALES

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

DVT Prophylaxis: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM, Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines.

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

Decision rationale: The requested deep vein thrombosis prophylaxis for a simple knee arthroscopic procedure cannot be recommended as medically necessary. Deep vein thrombosis prophylaxis is not generally utilized in patients who undergo knee arthroscopy unless they have significant risk factors. The records provided for review do not indicate significant risk factors for this claimant that would warrant deep vein thrombosis prophylaxis. Deep vein thrombosis

prophylaxis is generally reserved for more extensive procedures such as total knee arthroplasty or for patients with a greater risk of developing a thrombosis.

Levaquin #20 750mg for 10 days (peri-operation): Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM, Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG): Chapter Hip and Pelvis.

Decision rationale: The request for ten days of pre-operative antibiotics for a knee arthroscopy is both highly unusual and unsupported. Extended treatment with antibiotics for ten days would only be recommended in patients who already have an established infection and would not be indicated for prophylactic treatment. Most orthopedic surgeons will give a single dose of a preoperative antibiotic even though some medical studies suggest that prophylactic antibiotics may not even be required before pursuing an uncomplicated arthroscopic meniscectomy procedure. There is no indication that the claimant has some type of extenuating circumstances that would require a lengthy duration of preoperative antibiotics and the ten day treatment with Levaquin cannot be supported.