

<b>Case Number:</b>	CM13-0057493		
<b>Date Assigned:</b>	12/30/2013	<b>Date of Injury:</b>	05/03/2013
<b>Decision Date:</b>	05/28/2014	<b>UR Denial Date:</b>	11/08/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/25/2013

### 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 Occupational 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:

The patient is a 23 year old female who was injured on 05/03/2013 while opening up a 500-pound gate, the gate fell and hit/cut her back. Prior treatment history has included physical therapy, 6 sessions. Diagnostic studies reviewed include x-rays of the right ankle dated 05/03/2013 revealing a normal right ankle. An MRI of the right ankle dated 08/08/2013 revealed the following: 1) Peroneus longus partial tendon tear. 2) ATAF partial tear. 3) PTAF partial tear. 4) ATIF partial tear. Progress note dated 10/09/2013 documented the patient with complaints of pain in the right foot and ankle. Objective findings on examination of the right foot and ankle revealed range of motion: Plantar flexion 50 degrees, dorsiflexion 10 degrees, eversion 30 degrees and inversion 10 degrees. Progress note dated 11/20/2013 documented the patient with complaints of pain in the right ankle. Objective findings on exam reveal right ankle range of motion: plantar flexion is 60 degrees, dorsiflexion is 10 degrees, eversion is 30 degrees and inversion is 10 degrees.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Ankle brace:** Overturned

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 1044-1046.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 376. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Ankle, Immobilization.

**Decision rationale:** According to the CA MTUS guidelines, taping or bracing is recommended later in the course of acute ankle injury to avoid exacerbation or for prevention. The request was made several months after the date of injury in which the patient apparently suffered partial ligament tears to the right ankle. Medical necessity is established.