

<b>Case Number:</b>	CM13-0059646		
<b>Date Assigned:</b>	04/09/2014	<b>Date of Injury:</b>	03/03/2011
<b>Decision Date:</b>	07/01/2014	<b>UR Denial Date:</b>	11/19/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	12/02/2013

### 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 and is licensed to practice in Texas and Ohio. 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 injured worker is a 51-year-old male with a reported date of injury on 03/03/2011. The mechanism of injury was not submitted with the medical records. The progress note dated 04/04/2013 reported the injured worker was walking on the lateral aspect of his right foot and beginning to have calf, hamstring, and quadriceps pain on the right leg. The progress note dated 11/20/2013 listed the diagnosis as large plantar fibroma and compression of the medial plantar nerve. The progress note reported the injured worker's pain was neurogenic and part of the pain was from the irritation of the medial plantar nerve being compressed by a rock-like mass in the plantar fascia. The progress note reported the injured worker complained of constant pain to the left foot rated 6/10 as the least pain and 10/10 as the worst pain. There is a notation the injured worker was waiting for authorization for surgery to the left ankle. The request of authorization form was not submitted within the medical records. The request is for electromyography and nerve conduction study to the right lower extremity.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**EMG RIGHT LOWER EXTREMITY:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 377.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 377.

**Decision rationale:** The request for electromyography to the right lower extremity is non-certified. The injured worker has a history of pain and compression of the medial plantar nerve to the left foot. CA MTUS/ACOEM Guidelines do not recommend electromyography for routine foot and ankle problems without clinical evidence of tarsal tunnel syndrome or other entrapment neuropathies. The injured extremity is the left foot and there is a plantar fibroma noted in the documentation submitted. There is a lack of documentation regarding the need for electromyography to the right lower extremity due to lack of continuous pain or any entrapment neuropathies noted. Therefore, the request is not medically necessary.

**NCS RIGHT LOWER EXTREMITY:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 377.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 377.

**Decision rationale:** The request for a nerve conduction study to the right lower extremity is non-certified. The injured worker's documentation provided reports pain to the left foot. CA MTUS/ACOEM Guidelines do not recommend nerve conduction studies for routine foot and ankle problems without clinical evidence of tarsal tunnel syndrome or other entrapment neuropathies. There is a lack of documentation indicating continuous pain or any entrapment neuropathies to the noted to necessitate the need for a nerve conduction study to the right lower extremity. Therefore, the request is not medically necessary.