

Case Number:	CM13-0065847		
Date Assigned:	01/03/2014	Date of Injury:	04/26/2011
Decision Date:	04/04/2014	UR Denial Date:	11/01/2013
Priority:	Standard	Application Received:	12/13/2013

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 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:

The patient is a 57-year-old male who reported injury on 04/26/2011. The mechanism of injury as noted to be the patient twisted his leg while walking on a roof. The patient had the most recent clinical documentation indicated the patient had surgery on his right ankle in 2012. The clinical documentation submitted for review indicated the patient had been certified for a right knee medial meniscectomy and the request was made for an assistant during surgery. The patient's diagnosis was noted to be internal derangement of the knee

IMR ISSUES, DECISIONS AND RATIONALES

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

Second assistant for right knee medial meniscectomy: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Page(s): 343. Decision based on Non-MTUS Citation Official Disability Guidelines: Knee Chapter: Meniscectomy

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Surgeons, Physician's as Assistants at Surgery 2011

Decision rationale: The Physician's as Assistants at Surgery 2011 indicates that a surgical assistant is appropriate for a meniscectomy. However, the request as submitted indicated the request was for a second assistant for a right knee medial meniscectomy. There was a lack of

documentation indicating the rationale for a second assistant. Therefore, the request for second assistant for a right knee medial meniscectomy is not medically necessary and appropriate