

Case Number:	CM13-0066222		
Date Assigned:	01/03/2014	Date of Injury:	06/19/2013
Decision Date:	05/19/2014	UR Denial Date:	11/13/2013
Priority:	Standard	Application Received:	12/16/2013

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 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 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:

According to the records made available for review, this is a 45-year-old female with a 6/19/13 date of injury. At the time (9/12/13) of request for authorization for custom made splint, there is documentation of subjective (paresthesia and numbness in the left hand/wrist in the median innervated digits) and objective (decreased grip strength bilaterally and decreased sensation to the median innervated digits) findings, EMG and nerve conduction study (undated) revealing moderately severe left carpal tunnel syndrome, current diagnoses (left carpal tunnel syndrome), and treatment to date (physical therapy, medication, and activity modification). In addition, 10/24/13 medical report plan identifies left open carpal tunnel release pending authorization.

IMR ISSUES, DECISIONS AND RATIONALES

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

CUSTOM MADE SPLINT: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 271-273. Decision based on Non-MTUS Citation ODG Carpal Tunnel Syndrome (updated 5/7/13), Splinting

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 270.

Decision rationale: MTUS reference to ACOEM identifies documentation of a condition/diagnosis (with supportive subjective/objective findings) for which splinting as first-line conservative treatment is indicated (such as carpal tunnel syndrome, DeQuervain's, and strains (optional: prolonged splinting and prolonged post-operative splinting)). In addition, MTUS reference to ACOEM guidelines identifies that studies show no beneficial effect from postoperative splinting after carpal tunnel release when compared to a bulky dressing alone; and that splinting the wrist beyond 48 hours following CTS release may be largely detrimental, especially compared to a home therapy program. Within the medical information available for review, there is documentation of a diagnosis of left carpal tunnel syndrome. In addition, given documentation of subjective findings (paresthesia and numbness in the left hand/wrist in the median innervated digits), objective findings (decreased grip strength bilaterally and decreased sensation to the median innervated digits), and EMG/nerve conduction study revealing moderately severe left carpal tunnel syndrome, there is documentation of a condition/diagnosis (with supportive subjective/objective findings) for which splinting as first-line conservative treatment is indicated (carpal tunnel syndrome). However, given documentation of a plan identifying left open carpal tunnel release pending authorization, there is no documentation of a rationale identifying the medical necessity of the requested custom made splint. Therefore, based on guidelines and a review of the evidence, the request for custom made splint is not medically necessary.