

Case Number:	CM13-0066447		
Date Assigned:	01/03/2014	Date of Injury:	11/08/2010
Decision Date:	07/25/2014	UR Denial Date:	12/05/2013
Priority:	Standard	Application Received:	12/10/2013

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 Arizona. 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:

This is a 40-year-old who sustained a slip and fall while at work on November 8, 2010. Since that time she has complained of pain in her knees and recently underwent arthroscopic surgery on December 6, 2013; at which time a loose body was removed, multi-compartmental synovectomy was done and a partial medial meniscectomy. As of the examination on February 4, 2013, the patient was still having difficulty walking and performing activities of daily living (ADLs). A request was made preoperatively for a Vascutherm hot/cold compression unit for thirty days.

IMR ISSUES, DECISIONS AND RATIONALES

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

VASCUTHERM HOT/COLD COMPRESSION WITH KNEE PAD X30 DAYS: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) knee (for example Knee), continuous flow cryotherapy, game ready accelerated recovery system.

Decision rationale: There is no specific reference in the American College of Occupational and Environmental Medicine (ACOEM) Practice Guidelines to these units. However, the guidelines

do state that at home application of heat or cold packs may be used before and after exercises and are as effective as those performed by a therapist. The ODG guideline recommends these units as an option after surgery for up to seven days including home use. The above device has been requested for thirty days. The request for a vasotherm hot/cold compression with knee pad for thirty days is not medically necessary or appropriate.