

Case Number:	CM13-0067722		
Date Assigned:	01/03/2014	Date of Injury:	03/24/2011
Decision Date:	07/28/2014	UR Denial Date:	12/03/2013
Priority:	Standard	Application Received:	12/18/2013

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:

This is a claimant with an industrial injury reported as 3/24/11. An EMG/NCV report on 5/22/12 demonstrates right carpal tunnel syndrome. The claimant had a carpal tunnel release on 7/15/13. There was no documentation of how many visits of therapy were completed post carpal tunnel release from submitted records.

IMR ISSUES, DECISIONS AND RATIONALES

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

POST OP PHYSICAL THERAPY FOR THE RIGHT HAND/WRIST: Upheld

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

MAXIMUS guideline: Decision based on MTUS Postsurgical Treatment Guidelines.

Decision rationale: Per the CA MTUS/Post Surgical Treatment Guidelines, 3-8 visits over a 3 month period is recommended. From the submitted records, there is insufficient documentation of how many visits have been performed postoperatively. In addition, the request is outside the 3 month allowed window. Therefore, the request is not medically necessary.