

<b>Case Number:</b>	CM13-0067972		
<b>Date Assigned:</b>	01/08/2014	<b>Date of Injury:</b>	06/11/2013
<b>Decision Date:</b>	05/07/2014	<b>UR Denial Date:</b>	12/11/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	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 59-year-old gentleman suffered a vocational related injury to his left knee on 06/11/13. The records reflect that he underwent a left total knee arthroplasty on 10/18/13. The request is to determine the medical necessity of 12 sessions of therapy (six times a week for two weeks). The records reflect that as of a therapy note of 12/13/13, the patient reportedly had met 100% of the goals and range of motion from 0 to 125. The records reflect on the therapy note from 12/13/13 that the patient had attended 29 sessions of therapy. Unfortunately, the records do not describe whether or not all of those sessions were following the surgery or for rehab prior to the most recent total knee arthroplasty. In the note documented by Mr. Perez's attended provider, he states that Mr. Perez has only attended 12 sessions of therapy at the time of his note from January of 2014. He states that MTUS Guidelines would typically recommend up to 24 sessions.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**ADDITIONAL PHYSICAL THERAPY TO THE LEFT KNEE, TWICE A WEEK FOR SIX WEEKS:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Postsurgical Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Postsurgical Treatment Guidelines.

**Decision rationale:** The California MTUS Postsurgical Rehabilitative 2009 Guidelines point out that up to 24 sessions of therapy are typically recommended for patients to achieve satisfactory rehabilitation following total knee arthroplasty. The indications for therapy, however, are based on the patient's clinical course. It would appear, based on the therapy note from December of 2013, that as of two months postop, the patient had achieved all of the therapy goals, and had range of motion from 0 to 125. If the patient was able to successfully to do that in 12 visits, it would be unclear as to the indications for an additional 12 visits of physical therapy as the patient reportedly had achieved all of their goals. As such, the request for 12 sessions would not be considered reasonable and medically necessary based on the patient's excellent recovery to date and documentation within the physical therapy notes.