

Case Number:	CM13-0068275		
Date Assigned:	01/03/2014	Date of Injury:	04/04/2013
Decision Date:	08/20/2014	UR Denial Date:	12/10/2013
Priority:	Standard	Application Received:	12/19/2013

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 Plastic Surgery, has a subspecialty in Hand Surgery and is licensed to practice in Oregon. 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:

The patient is a 33-year-old male with a date of injury of 4/4/2013. He had been treated for a finger laceration and is currently experiencing finger numbness with decreased movement of the finger. Objectively, there is diminished sensation along the radial aspect of the left index finger and tenderness in the left index finger. Diagnoses were traumatic laceration with skin avulsion to the proximal phalanx of left index and laceration of the bilateral flexor tendons and radial digital nerve of left index. Surgery with [REDACTED] is recommended.

IMR ISSUES, DECISIONS AND RATIONALES

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

Continue care with [REDACTED] for treatment including surgery for left index finger:
Overturned

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 258.

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

Decision rationale: According to ACOEM Chapter 11, page 270, "Referral for hand surgery consultation may be indicated for patients who: Have red flags of a serious nature; Fail to respond to conservative management, including worksite modifications; Have clear clinical and

special study evidence of a lesion that has been shown to benefit, in both the short and long term, from surgical intervention ." This patient has tendon and nerve injuries. Surgery is indicated to restore function to the injured finger. Both tendon and nerve repairs are necessary, and a hand surgeon should perform the procedures. Therefore, the request is medically necessary.