

<b>Case Number:</b>	CM14-0002614		
<b>Date Assigned:</b>	02/21/2014	<b>Date of Injury:</b>	09/07/2012
<b>Decision Date:</b>	06/16/2014	<b>UR Denial Date:</b>	12/10/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/07/2014

### 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:

The injured worker is a 52-year-old female who was injured on September 07, 2012. The injured worker is documented as having a persistent dislocation of the 5th toe of the left foot dorsally and laterally. The previous conservative measures have included physical therapy, Lidoderm patches, and injections. The injection is documented on November 2, 2013 as providing "tremendous improvement." A previous utilization review denied the requested operative intervention based on the fact that conservative interventions were improving the pain, and that there was no documentation of failure of non-operative treatment protocols, including accommodative shoe wear. Subsequent clinical documents from January 2014 indicates that accommodative shoe wear continued to cause pain, and that the previous injections provided only a few weeks of relief.

### IMR ISSUES, DECISIONS AND RATIONALES

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

#### **RECONSTRUCTIVE FOOT SURGERY 5TH DIGIT LEFT FOOT: Overturned**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation J FOOT ANKLE SURG. 2011 SEP-OCT;50(5):580-4. DOI: 10.1053/J.JFAS.2011.04.032 EPUB 2011 MAY 31, INTERPHALANGEAL DISLOCATION OF TOES; A RETROSPECTIVE CASE SERIES AND REVIEW OF THE LIT. YANG IB, SUN KK, SHA WL, YU KS, CHOW YY SOURCE.

The Claims Administrator also cited the DEPARTMENT OF ORTHOPAEDICS AND TRAUMATOLOGY, [REDACTED].

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation J FOOT ANKLE SURG. 2011 SEP-OCT;50(5):580-4. DOI: 10.1053/J.JFAS.2011.04.032 EPUB 2011 MAY 31, INTERPHALANGEAL DISLOCATION OF TOES; A RETROSPECTIVE CASE SERIES AND REVIEW OF THE LIT. YANG IB, SUN KK, SHA WL, YU KS, CHOW YY SOURCE.

**Decision rationale:** The request represents a fairly unique case of a chronically dislocated 5th digit of the foot. Numerous conservative measures were attempted, and following the initial denial of the accommodative shoes was also attempted. The claimant did not receive lasting relief from any of the attempted non-operative measures. As such, the requested operative intervention for reduction of the persistent dislocation is considered medically necessary.