

Case Number:	CM14-0105509		
Date Assigned:	07/30/2014	Date of Injury:	01/18/2012
Decision Date:	09/10/2014	UR Denial Date:	06/06/2014
Priority:	Standard	Application Received:	07/08/2014

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 Anesthesiology, Pain Medicine and is licensed to practice in Florida. 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 42-year-old male who reported an injury on 01/18/2012 due to repetitive movement. The injured worker's diagnoses are medial nerve entrapment at the wrist, bilateral ulnar nerve entrapment at the elbow, bilateral forearm myalgia, bilateral thumb, carpometacarpal joint arthralgia, right small and ring finger tenosynovitis with triggering, left ring and small finger tenosynovitis. Prior treatments were status post bilateral thumb CMC joint injection with ultrasound guidance on 04/30/2014. The injured worker's past diagnostics include an EMG and an NCV on 09/07/2012, on 03/20/2014 there was x-rays of the bilateral hand and wrist which revealed bilateral thumb CMC subluxation of the right thumb CMC joint space. The injured worker's surgical history includes medial nerve decompression at the wrist on 01/14/2013, nerve ulnar decompression at the elbow on 04/15/2013 and a trigger finger release on 10/17/2013. The injured worker complained of not being able to extend the right ring finger and small fingers to the fullest. Numbness was in the right ring and small finger with pain in both thumbs and wrists. Left elbow still had a burning sensation. Physical examination dated 06/04/2014 revealed the injured worker had tenderness to palpation at the thumb CMC joint with positive grinding maneuver. The treatment plan is for repeat bilateral thumb CMC injections with ultrasound guidance. The rationale for the request was not submitted with documentation. The Request for Authorization Form is provided with documentation submitted for review dated 06/05/2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Repeat bilateral thumb CMC joint injections with ultrasound guidance: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 264-265. Decision based on Non-MTUS Citation Official Disability Guidelines, Pain (Chronic).

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 265-266.

Decision rationale: The request for a repeat bilateral thumb CMC joint injection with ultrasound guidance is not medically necessary. According to the California MTUS/ACOEM, guidelines most invasive techniques such as needle, acupuncture, and injection procedures have insufficient high quality evidence to support their use. The exception is corticosteroid injection about the tendon sheath or possibly the carpal tunnel in cases resistant to conservative therapy for 8 to 12 weeks for optimal care a clinician may always try conservative methods before considering an injection. The injured worker in the most current clinical reported that he was not able to extend the right ring finger and small ring finger to the fullest. Numbness in the right ring and small fingers put pain to both thumbs and wrists. The injured worker had x-rays done on 03/20/2014 which revealed bilateral thumb CMC subluxation of the right thumb and CMC joint space narrowing. The injured worker already received bilateral thumb CMC joint injections with ultrasound guidance to which there is lack of documentation that the injured worker benefitted from the previous injections. There was also lack of documentation for conservative care directed to bilateral thumbs. There is no mention in documentation of physical therapy and/or medication management. There is an absence of documentation as to functional improvement from prior CMC joint injections and prior conservative care. Therefore, this request is not medically necessary.