

Case Number:	CM14-0106718		
Date Assigned:	07/30/2014	Date of Injury:	11/20/2013
Decision Date:	08/29/2014	UR Denial Date:	06/27/2014
Priority:	Standard	Application Received:	07/10/2014

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 Pennsylvania. 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 34-year-old male who sustained a vocational injury working as a tile setter on 11/20/13. The medical records provided for review document a diagnosis of right lateral epicondylitis with probable radial tunnel syndrome. The report of the office visit on 07/25/14 noted pain around the proximal forearm and the right lateral elbow worse with gripping as well as discomfort in the long and ring fingers. He also complained of popping in his elbow. Examination revealed marked tenderness over the right lateral epicondyle as well as the right radial tunnel. Provocative testing was positive for epicondylitis and for radial tunnel syndrome. The report of X-rays from 07/01/14 showed no abnormalities. Conservative treatment to date has included an elbow injection, tennis elbow strap, formal physical therapy with modalities, and antiinflammatory medications. This request is for right tennis elbow release.

IMR ISSUES, DECISIONS AND RATIONALES

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

Right tennis elbow release: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 10 Elbow Disorders (Revised 2007).

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 10 Elbow Disorders (Revised 2007) Page(s): 44-49.

Decision rationale: California MTUS ACOEM Guidelines recommend that surgical intervention for lateral epicondylitis provides no significant relief for long term prognosis than traditional conservative treatment. The medical records do not document that the claimant has any substantial loss of functional or vocational function. Therefore, based on the ACOEM Guidelines, the request for the right tennis elbow release cannot be considered medically necessary.

Right Radial tunnel release: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), (<http://www.odg-twc.com//elbow.htm>).

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 10 Elbow Disorders (Revised 2007) Page(s): 37, 46-47.

Decision rationale: In regards to the request for a right radial tunnel release, currently there is no documentation of EMG or nerve conduction study supporting pathology at the radial tunnel which may be amenable via surgical intervention as recommended by ACOEM Guidelines. Therefore, based on the documentation presented for review and in accordance with California ACOEM Guidelines, the request for the right radial tunnel release cannot be considered medically necessary.

Postoperative occupational therapy 2x4 weeks: 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: Since the primary procedure is not medically necessary, none of the associated services are medically necessary.