

Case Number:	CM14-0011329		
Date Assigned:	02/21/2014	Date of Injury:	06/08/1997
Decision Date:	08/04/2014	UR Denial Date:	01/21/2014
Priority:	Standard	Application Received:	01/28/2014

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, has a subspecialty in Pain Management and is licensed to practice in Tennessee. 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 46-year-old male who has submitted a claim for Ankle Synovitis associated with an industrial injury date of June 8, 1997. Medical records from 2013 were reviewed, which showed that the patient complained of left ankle pain. On physical examination, tenderness was noted but no sensorimotor deficits of the left ankle were reported. Capillary refill was normal. The patient walked with a slightly abnormal gait. An undated MRI scan of the left ankle showed old postoperative changes about the left side of the malleolar area compatible with talonavicular joint arthritis. Treatment to date has included a left ankle injection of Marcaine and DepoMedrol (February 28, 2013).

IMR ISSUES, DECISIONS AND RATIONALES

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

Left ankle injection of Marcaine and Depomedrol: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 369-371.

Decision rationale: According to pages 369-371 of the ACOEM Practice Guidelines referenced by CA MTUS, invasive techniques (e.g. needle acupuncture and injection procedures) have no

proven value with the exception of corticosteroid injection into the affected web space in patients with Morton's neuroma or into the affected area in patients with plantar fasciitis or heel spur if four to six weeks of conservative therapy is ineffective. In this case, the patient was diagnosed with ankle synovitis and had MRI findings of talonavicular joint arthritis. Guidelines are silent with regard to corticosteroid injections for these conditions. The patient also underwent a previous ankle injection but objective evidence of functional improvement was not documented. Therefore, the request for left ankle injection of marcaine and depomedrol is not medically necessary.