

<b>Case Number:</b>	CM14-0012410		
<b>Date Assigned:</b>	02/21/2014	<b>Date of Injury:</b>	08/27/2007
<b>Decision Date:</b>	07/17/2014	<b>UR Denial Date:</b>	01/20/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/30/2014

### 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 patient is a 40-year-old male who has submitted a claim for left foot/ankle sprain contusion associated with an industrial injury date of 08/27/2007. Medical records from 2013 were reviewed. The patient complained of left foot/ankle pain and swelling with sharp shooting sensation. The patient likewise felt loose body sensation at left ankle. A physical examination revealed swelling and antalgic gait. No instability was noted. There was no neurologic deficit. An MRI of the left ankle, dated 11/12/2012, revealed mildly attenuated anterior tibia-fibula and anterior talofibular ligaments that could be congenital or related to prior mild sprain injuries. Both ligaments remained at least partially intact. The treatment to date has included home exercise program, and medications such as Skelaxin, ibuprofen, and Tylenol. The utilization review from 01/20/2014 denied the requests for left ankle arthroscopy and assistant surgeon, because there was no documentation concerning failure of conservative management.

### IMR ISSUES, DECISIONS AND RATIONALES

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

#### **LEFT ANKLE ARTHROSCOPY:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 374-375.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 374.

**Decision rationale:** The MTUS/ACOEM Guidelines state that surgical consultation/intervention may be indicated for patients who have activity limitation for more than one (1) month without signs of functional improvement, failure of exercise programs to increase range of motion and strength of the musculature around the ankle and foot, and clear clinical and imaging evidence of a lesion that has been shown to benefit in both the short and long term from surgical repair. In this case, the patient complained of left foot and ankle pain associated with swelling. An MRI revealed mildly attenuated anterior tibia-fibula and anterior talofibular ligaments that could be congenital or related to prior mild sprain injuries. However, there was no comprehensive physical examination of the left ankle available. The notes also showed no instability. Moreover, there was no evidence that patient had failed conservative management. The medical necessity was not established due to insufficient information. Therefore, the request for left ankle arthroscopy is not medically necessary.

**ASSISTANT SURGEON:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** The Expert Reviewer did not cite any medical evidence for its decision.

**Decision rationale:** Since the primary procedure is not medically necessary, none of the associated services are medically necessary.