

<b>Case Number:</b>	CM14-0012722		
<b>Date Assigned:</b>	02/21/2014	<b>Date of Injury:</b>	08/02/2010
<b>Decision Date:</b>	08/07/2014	<b>UR Denial Date:</b>	12/31/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/31/2014

### 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 Occupational Medicine 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:

This is a 51-year-old female with a 8/2/10 date of injury. She injured her ankle when she fell and twisted her right ankle while going downstairs. On 12/19/13, the patient reports worsening of her knees, numbness on the left leg that continues to her right foot/toes and sensitivity to touch to her lower leg. Objective exam: color change in the calf, reddened and tender to touch, and difficulty with ambulation. It is documented that they would like a referral to orthopedics for compartment pressure measurements because the patient has an extreme sensation of tightness in the calf. Treatment to date: lumbar laminectomy, total knee replacement, medication management, activity modification. A UR decision dated 12/31/13 denied the request for compartment pressure testing of the right calf due to the fact that there is no documentation of trauma. The patient does not meet the criteria for suspecting compartment syndrome.

### IMR ISSUES, DECISIONS AND RATIONALES

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

#### **COMPARTMENT PRESSURE TESTING OF RIGHT CALF: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 13 Knee Complaints.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Wheelless' Textbook of Orthopaedics: Compartment Syndrome.

**Decision rationale:** CA MTUS and ODG do not address this issue. Wheeless' Textbook of Orthopaedics states that Compartment Syndrome is an elevation of interstitial pressure in closed fascial compartment that results in microvascular compromise. On exam, compartment syndrome is consistent with extreme pain out of proportion, pain on passive ROM of the toes, pallor, paralysis, paresthesias, and decreased pulses. However, the patient has a 2010 date of injury and there is no documentation of recent trauma that would put the patient at risk for compartment syndrome. The patient is noted to have tightness of her calf on exam, but there are no other significant findings subjectively or objectively concerning for compartment syndrome. Therefore, the request for Compartment Pressure Testing of the Right Calf was not medically necessary.