

<b>Case Number:</b>	CM14-0016430		
<b>Date Assigned:</b>	04/11/2014	<b>Date of Injury:</b>	06/13/2009
<b>Decision Date:</b>	05/12/2014	<b>UR Denial Date:</b>	01/24/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	02/10/2014

### 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 Orthopaedic 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:

This 51-year-old male sustained an industrial injury on 6/13/09. He is status post three arthroscopies of the right knee. A flare of right knee pain was reported with hyperextension at work on 6/26/13. Conservative treatment included anti-inflammatory medication, steroid injection on 7/19/13, and a series of Orthovisc injections in October 2013. Significant benefit was noted with the steroid injection and the patient returned to full duty work. Orthovisc injections were reported beneficial and the patient continued working full duty. The 1/13/14 treating physician report cited continued intermittent right knee pain from degenerative changes along the lateral joint line. Physical findings noted mild loss of range of motion, trace effusion, and three plane ligament stabilities. The diagnosis was right knee degenerative joint disease. The patient was working full duty. A platelet rich plasma injection was recommended for the right knee. The provider stated that multiple studies had shown these injections to be effective in early arthritis. He noted that the patient had had this problem for many years and was trying to work full time and extend his career.

### IMR ISSUES, DECISIONS AND RATIONALES

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

#### **PLATELET RICH PLASMA INJECTION FOR THE RIGHT KNEE: 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) Knee, Platelet-rich plasma (PRP)

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee, Platelet-rich plasma (PRP)

**Decision rationale:** Under consideration was a request for platelet rich plasma (PRP) injection for the right knee. The California MTUS do not provide recommendations PRP injections. The Official Disability Guidelines indicate that PRP injections are under study. The ODG states that PRP looks promising in patients with very early arthritis under the age of 50, but there is no science behind it yet, despite the popularity among professional athletes for performance enhancement. The American Academy of Orthopedic Surgeons working group for PRP was unable to provide recommendations for the use in patients with degenerative joint disease based on insufficient evidence. There is no compelling reason to support the medical necessity of this request in the absence of evidence based medical guidelines support for this patient. Therefore, this request for platelet rich plasma injection for the right knee is not medically necessary.