

<b>Case Number:</b>	CM14-0017147		
<b>Date Assigned:</b>	04/14/2014	<b>Date of Injury:</b>	09/06/2013
<b>Decision Date:</b>	05/30/2014	<b>UR Denial Date:</b>	02/03/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	02/11/2014

### 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 Physical Medicine and Rehabilitation, has a subspecialty in Interventional Spine, 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 IMR application lists the date of injury as 9/6/13, and shows a dispute with the 2/3/14 UR decision. The 2/3/14 UR letter is from [REDACTED] and describes the patient as a 65 year-old female, and based on the 1/27/14 medical report from [REDACTED], recommends non-certification for 3 Synvisc injections to the left knee and 3 Synvisc injections for the right knee. The medical records provided for this IMR did not contain any records from [REDACTED]. The 1/27/14 report is from [REDACTED] medical group. This report describes the patient as 65 year-old male with a right shoulder injury, and also has a different date of injury (8/5/09, and CT through 9/16/09). There is a PR2 dated 9/10/13 by [REDACTED], that states the 65 year-old bus driver hit both knee caps on the fare box while getting up from the seat of the bus on 9/6/13.

### IMR ISSUES, DECISIONS AND RATIONALES

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

#### **3 SYNVISIC INJECTIONS TO THE RIGHT KNEE:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 338.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG-TWC guidelines, Knee chapter for Hyaluronic acid injections; (<http://www.odg-twc.com/odgtwc/knee.htm#Hyaluronicacidinjections>).

**Decision rationale:** There is limited and conflicting information provided for this IMR. The patient is apparently in his/her mid 60's, works as a bus driver, and on 9/6/13 hit his kneecaps on the farebox while getting up from the seat. I have not been provided any medical records from [REDACTED] who apparently evaluated the patient on 1/27/14 and recommended Synvisc injections for the knees. The 1/27/14 report provided is from [REDACTED], and appears to be for a right shoulder injury from 2009. I have been asked to review for Synvisc x3 for the right knee. ODG guidelines detail hyaluronic acid injections and state there must be documentation of severe osteoarthritis of the knee, and gives criteria for osteoarthritis. ODG requires at least 5 of the 9 items be present. I have no reports with a knee exam or rationale for the injections, and the only criteria appears to be "over 50 years of age". It is not clear if pain interferes with functional activities. The diagnoses from 9/10/13 was contusion, knee bilateral. The limited information provided for this IMR does not support necessity for Synvisc injections.

### **3 SYNVISIC INJECTIONS TO THE LEFT KNEE: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 338.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG-TWC guidelines, Knee chapter for Hyaluronic acid injections (<http://www.odg-twc.com/odgtwc/knee.htm#Hyaluronicacidinjections>).

**Decision rationale:** There is limited and conflicting information provided for this IMR. The patient is apparently in his/her mid 60's, works as a bus driver, and on 9/6/13 hit his kneecaps on the farebox while getting up from the seat. I have not been provided any medical records from [REDACTED] who apparently evaluated the patient on 1/27/14 and recommended Synvisc injections for the knees. The 1/27/14 report provided is from [REDACTED], and appears to be for a right shoulder injury from 2009. I have been asked to review for Synvisc x3 for the right knee. ODG guidelines detail hyaluronic acid injections and state there must be documentation of severe osteoarthritis of the knee, and gives criteria for osteoarthritis. ODG requires at least 5 of the 9 items be present. I have no reports with a knee exam or rationale for the injections, and the only criteria appears to be "over 50 years of age". It is not clear if pain interferes with functional activities. The diagnoses from 9/10/13 was contusion, knee bilateral. The limited information provided for this IMR does not support necessity for Synvisc injections.