

Case Number:	CM14-0018657		
Date Assigned:	04/18/2014	Date of Injury:	06/30/2008
Decision Date:	07/02/2014	UR Denial Date:	01/17/2014
Priority:	Standard	Application Received:	02/13/2014

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 Podiatric Surgery and is licensed to practice in New York. 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:

According to the enclosed progress notes, this patient was seen by his podiatrist on March 28, 2014. During that visit the patient complained of bilateral persistent ankle pain. Diagnoses include Achilles tendinitis and prior Achilles rupture. Platelet Rich Plasma (PRP) injections to bilateral (BL) ankles were recommended. On April 22, 2014 the progress note is mostly handwritten and mostly illegible. I have evaluated this progress note to the best of my ability. It appears that on April 21, 2014 this patient was walking to his car and felt a pop to both of his ankles. The patient describes this as his legs "giving away." Patient notes that sometime in August 2011 he had Achilles tendon ruptures. Diagnoses include Achilles tendinitis. Amongst other recommendations, the podiatrist has recommended PRP injections to BL ankles.

IMR ISSUES, DECISIONS AND RATIONALES

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

PLASMA RICH PLATELET INJECTIONS TO THE BILATERAL ANKLES: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Non-MTUS Official Disability Guidelines.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 371. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Ankle, Achilles, tendinitis, ankle pain, PRP.

Decision rationale: Chapter 14 of the ACOEM, page 371 advises that 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. Clearly stated, injection procedures, which certainly can be considered PRP injections, have no proven value. Furthermore, the ODG guidelines on ankle pain state that PRP injections are not recommended, with recent higher quality evidence showing this treatment to be no better than placebo. This systematic review concluded that PRP injections for Achilles tendinopathy does not improve health outcomes. Therefore, the request for plasma rich platelet injections to the bilateral ankles is not medically necessary and appropriate.