

<b>Case Number:</b>	CM14-0124500		
<b>Date Assigned:</b>	09/16/2014	<b>Date of Injury:</b>	12/22/1970
<b>Decision Date:</b>	12/09/2014	<b>UR Denial Date:</b>	07/28/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/06/2014

### 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 patient is a 74 year old male with an injury date of 12/22/70. Based on the 07/11/14 progress report provided by [REDACTED] the patient complains of bilateral knee pain. Physical examination to the bilateral knees revealed well-healed scars and bony protrusions on anterior, medial, lateral surfaces along with effusions, and tenderness along sides of the patellotibial ligament. The patient had multiple knee surgeries, including bilateral knee replacement. The patient had intra-articular knee injection in 2009 which provided 50% relief for 2 months. The patient takes Norco to help with his pain. The patient's diagnosis dated 07/11/14 included chronic bilateral knee pain, chronic degenerative knee arthritis and chronic pain syndrome. [REDACTED] is requesting bilateral knee Synvisc injections. The utilization review determination being challenged is dated 07/28/14. The rationale is "further clarification is needed regarding treatment history..." [REDACTED] is the requesting provider and he provided treatment reports from 05/13/14 - 07/11/14.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Bilateral Knee Synvisc Injections:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Chapter: Knee & Leg

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee & leg chapter, Synvisc for knee

**Decision rationale:** The patient presents with bilateral knee pain. The request is for Bilateral Knee Synvisc Injections. Physical examination of the bilateral knees on 07/11/14 revealed well-healed scars and bony protrusions on anterior, medial, lateral surfaces along with effusions, and tenderness along sides of the patellotibial ligament. Official Disability Guidelines on Synvisc for knee, "Repeat series of injections: This systematic review on the efficacy and safety of repeat courses of hyaluronan therapy in patients with OA of the knee concluded that repeat courses of the hyaluronans are safe and effective in the treatment of pain associated with OA of the knee. Repeat series of injections: If documented significant improvement in symptoms for 6 months or more, and symptoms recur, may be reasonable to do another series. No maximum established by high quality scientific evidence. Criteria - Are not currently candidates for total knee replacement or who have failed previous knee surgery for their arthritis, unless younger patients wanting to delay total knee replacement." Per progress report dated 07/11/14, the patient had intra-articular knee injection in 2009 which provided 50% relief for 2 months. The patient appears to have significant osteoarthritis of the knee for which Synvisc injections are indicated and has benefited from the procedure previously. Therefore, this request is medically necessary.