

Case Number:	CM14-0128408		
Date Assigned:	08/18/2014	Date of Injury:	10/15/2004
Decision Date:	09/15/2014	UR Denial Date:	08/02/2014
Priority:	Standard	Application Received:	08/12/2014

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 Orthopedic 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 is a 59-year-old female who sustained a vocational injury on 10/15/04. The medical records provided for review include an office note dated 05/15/14 noting that the claimant previously received platelet rich plasma injections of the bilateral elbows and noticed a significant decrease in the pain involving the left elbow, but had not yet benefited from the injection for the right elbow. The right elbow continued to have moderate discomfort. Examination revealed there was a substantial decline in the preinjection tenderness over the left lateral epicondyle. There was swelling and persistent pain noted with palpation about the right lateral epicondyle. Tinel's and Phalen's sign over both carpal tunnels were noted to be negative. The claimant was given a diagnosis of persistent bilateral lateral epicondylitis with left shoulder tendinopathy. Conservative treatment to date has included Voltaren, Protonix, Menthoderm and Norco, a Cortisone steroid injection on the right lateral epicondyle, bilateral wrist splints and bilateral elbow bands. The current request is for right elbow platelet rich plasma with ultrasound guidance.

IMR ISSUES, DECISIONS AND RATIONALES

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

Right elbow platelet rich plasma with ultrasound guidance: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 10 Elbow Disorders (Revised 2007) Page(s): 30-33. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG); Elbow chapter: Platelet-rich plasma (PRP)

Decision rationale: California MTUS ACOEM Guidelines and supported by the Official Disability Guidelines the request for the platelet rich plasma injection with ultrasound guidance to the right elbow cannot be considered medically necessary. Both California MTUS ACOEM Guidelines and Official Disability Guidelines do not support platelet rich plasma injections as medically necessary as there is insufficient literature supporting medical efficacy for success of the injection of both the short and long term prognosis. In addition, it is not medically clear why the ultrasound guidance is being requested as typically lateral epicondylar injections can be given with high success rate with traditional non-ultrasound approaches. Therefore, based on the documentation presented for review and in accordance with California MTUS ACOEM Guidelines and Official Disability Guidelines, the request for the platelet rich plasma injection with ultrasound guidance to the right elbow cannot be considered medically necessary.