

Case Number:	CM14-0128447		
Date Assigned:	08/15/2014	Date of Injury:	09/24/2013
Decision Date:	09/25/2014	UR Denial Date:	07/22/2014
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 Family Practice and is licensed to practice in Texas and Mississippi. 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 injured worker is a 44-year-old male who reported an injury due to repetitive motion on 09/24/2013. On 05/19/2014, his diagnoses included bilateral knee chronic strain, rule out meniscal tear, chronic bilateral ankle sprain, rule out right ankle peroneal tendon tear, and slightly impaired gait secondary to knee and ankle sprain. His complaints included constant bilateral knee, ankle, and foot pain which he rated at 8/10 before taking Motrin and 5/10 thereafter. His ankle and feet ranges of motion measured in degrees were plantar flexion 35/50, dorsiflexion 15/20, inversion 25/30, and eversion 15/25. The rationale for the requested MRI stated that due to the persistent pain in both knees and ankles, and decreased functionality, this injured worker could not stand for more than 10 minutes without pain. He ambulated with a cane. Therefore, the request was made for MRIs of both knees and both ankles. There was no Request for Authorization included in this worker's chart.

IMR ISSUES, DECISIONS AND RATIONALES

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

Magnetic Resonance imaging (MRI) for the left ankle: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 372-374.

Decision rationale: The request for Magnetic Resonance imaging (MRI) for the left ankle is not medically necessary. The California ACOEM Guidelines recommend that for most cases presenting with true foot and ankle disorders, special studies are usually not needed until after a period of conservative care and observation. Most ankle and foot problems improve quickly once any red flag issues are ruled out. Routine testing, such as laboratory tests, plain film radiographs of the foot or ankle, and special imaging studies are not recommended during the first month of activity limitation, except when a red flag is noted on history or examination raises suspicion of a dangerous foot or ankle condition or of referred pain. Disorders of soft tissue (such as tendinitis, metatarsalgia, fasciitis, and neuroma) yield negative radiographs and do not warrant other studies, e.g., magnetic resonance imaging (MRI). Magnetic resonance imaging may be helpful to clarify a diagnosis, such as osteochondritis dissecans in cases of delayed recovery. MRIs are not recommended for sprain, ligament tear, tendonitis, neuroma, metatarsalgia, hallux valgus, fasciitis, heel spur, metatarsal fracture, or toe fracture. There was no evidence in the submitted documentation that this injured worker had failed conservative care consisting of medications, physical therapy, acupuncture, or chiropractic treatment. Additionally, the guidelines do not support an MRI of the ankle for a sprain or strain. The need for an MRI was not clearly demonstrated in the submitted documentation. Therefore, this request Magnetic Resonance imaging (MRI) for the left ankle is not medically necessary.