

Case Number:	CM14-0135262		
Date Assigned:	08/29/2014	Date of Injury:	05/07/2014
Decision Date:	09/29/2014	UR Denial Date:	07/25/2014
Priority:	Standard	Application Received:	08/22/2014

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 Occupational Medicine 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 51-year-old female who has submitted a claim for left and right ankle sprain/strain, left and right Achilles tendinitis, right ankle contusion, bilateral calf strain, and right heel spur associated with an industrial injury date of 5/7/2014. Medical records from 6/20/2014 up to 7/15/2014 were reviewed showing left and right ankle pain, 6/10 in severity, characterized as burning, cramping, and constant. She is also complaining of activity dependent 6/10 bilateral leg pain, characterized as aching. Right ankle examination revealed decreased and painful ROM. There is 3+ tenderness over the dorsal, lateral, and medial sides of the right ankle. There is no bruising, swelling, atrophy, or lesion present. Anterior and posterior drawer tests cause pain. X-ray of the right tibia/fibula taken on 6/20/2014 showed 1cm plantar calcaneal spur, no fractures or dislocations, and no other abnormalities. X-ray of the right ankle taken on 6/20/2014 showed 1cm plantar calcaneal spur, no fractures or dislocations, and no other abnormalities. Internal derangement and/or subtle fracture is not absolutely ruled out on the basis of this exam. These can be further assessed with MRI, if clinically desirable and appropriate. Treatment to date has included right ankle brace, tramadol, Prilosec, Relafen, analgesic cream, and physical therapy. Utilization review from 7/25/2014 denied the request for MRI of the right ankle. Reason for denial was not made available.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI of the right knee: Overturned

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 based on Non-MTUS Citation Official Disability Guidelines (ODG) Foot and Ankle Chapter, Magnetic Resonance Imaging.

Decision rationale: The Expert Reviewer based his/her decision on the MTUS ACOEM Practice Guidelines, Chapter 14 Ankle and Foot Complaints, page 372-374 and on the Non-MTUS Official Disability Guidelines (ODG) Foot and Ankle Chapter, Magnetic Resonance Imaging. The Expert Reviewer's decision rationale: Pages 372 to 374 of CA MTUS ACOEM Guidelines state that "disorders of soft tissue (such as tendinitis, and metatarsalgia) yield negative radiographs and do not warrant other studies, e.g., magnetic resonance imaging (MRI)." ODG states that "ankle MRI is indicated with chronic ankle pain, pain of uncertain etiology, and when plain films are normal." In this case, the patient has complained of right ankle pain since at least 6/2014. PR dated 7/2014 noted right ankle pain, 6/10 in severity, characterized as burning, cramping, and constant. Right ankle examination revealed decreased and painful ROM. There is 3+ tenderness over the dorsal, lateral, and medial sides of the right ankle. There is no bruising, swelling, atrophy, or lesion present. Anterior and posterior drawer tests of the ankle cause pain. X-ray of the right tibia/fibula taken on 6/20/2014 showed 1cm plantar calcaneal spur, no fractures or dislocations, and no other abnormalities. X-ray of the right ankle taken on 6/20/2014 showed 1cm plantar calcaneal spur, no fractures or dislocations, and no other abnormalities. Internal derangement and/or subtle fracture is not absolutely ruled out on the basis of this exam. Therefore, the request for MRI of the right ankle is medically necessary.