

Case Number:	CM14-0137803		
Date Assigned:	09/05/2014	Date of Injury:	02/21/2013
Decision Date:	10/22/2014	UR Denial Date:	08/20/2014
Priority:	Standard	Application Received:	08/26/2014

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:

Injured worker is a female with date of injury 2/21/2013. Per primary treating physician's progress report dated 7/21/2014 (hand written and mostly illegible), wound is clean and dry. Diagnoses include 1) right anterior transposition ulnar nerve 2) right endoscopic carpal tunnel release 6/26/2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Occupational Therapy twice weekly for 4 weeks for the right wrist: Upheld

Claims Administrator guideline: Decision based on MTUS Postsurgical Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Postsurgical Treatment Guidelines Page(s): 15, 16.

Decision rationale: The MTUS Guidelines recommend 3-8 visits of postsurgical physical medicine over 3-5 weeks for endoscopic carpal tunnel release. The postsurgical physical medicine treatment period is 3 months. There is limited evidence demonstrating the effectiveness of PT (physical therapy) or OT (occupational therapy) for CTS (carpal tunnel syndrome). The evidence may justify 3 to 5 visits over 4 weeks after surgery. Benefits need to be documented after the first week, and prolonged therapy visits are not supported. Clinical note dated 6/30/2014 treatment plan includes starting occupational therapy for 3 weeks. Clinical note on 7/21/2014

treatment plan includes continue occupational therapy. There is no report of the total number of occupational therapy provided and the benefits from therapy are not reported. Therefore, Occupational Therapy twice weekly for 4 weeks for the right wrist is not medically necessary.