

Case Number:	CM14-0155265		
Date Assigned:	09/25/2014	Date of Injury:	08/27/2008
Decision Date:	10/27/2014	UR Denial Date:	08/26/2014
Priority:	Standard	Application Received:	09/22/2014

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 Podiatric Surgery and is licensed to practice in New York. 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:

According to the enclosed information, this injured worker was originally injured on 8/27/2008. Injury occurred to bilateral feet and ankles. Injured worker was evaluated by a physician for right foot and ankle pain on 8/14/2014. Injured worker states that roughly one year prior to this exam she started to exhibit right foot and ankle pain. Apparently this pain radiates of injured workers length and causes inability to sleep comfortably. She points to the pain noted to the first and second metatarsal's and the lateral sole of the foot and ankle. At the end of the day she notes right ankle swelling. Physical exam reveals swelling to the right foot and ankle lateral malleolus and dorsal lateral foot. Injured worker's lower extremity strength is intact, but there is tenderness upon palpation to the Achilles tendon and lateral malleolus. There is a positive anterior or sign right side upon stress. Ankle joint crepitus is noted. Right foot demonstrates tenderness upon palpation to the first and second metatarsal, outer malleolus, and insertion of plantar fascia. Neurologic status appears grossly intact lower extremity. Injured worker received a diagnosis of Achilles tendinitis, ankle sprain, and Tenosynovitis foot and ankle. The physician states that this injured worker has had a greater than one year history of increasing right foot and ankle pain and continues to work her regular job. The examination today is suggestive of ankle and foot arthropathy and soft tissue injury. This physician has recommended an MRI of the right foot and ankle.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI of the right ankle, without contrast.: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines, Ankle & foot

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 372 - 373.

Decision rationale: After careful review of the enclosed information and the pertinent MTUS guidelines for this case, the request for an MRI of the right ankle without contrast is not medically necessary. The MTUS guidelines state, with regards to specialized studies such as MRI: 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, i.e., 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 noted on history or examination raises suspicion of a dangerous foot or ankle condition or of referred pain. In particular, injured workers who have suffered ankle injuries caused by a mechanism that could result in fracture can have radiographs if the Ottawa Criteria are met. This will markedly increase the diagnostic yield for plain radiography. It does not appear that this injured worker has gone through a period of conservative care and observation. In fact, the one progress note enclosed in this case does not reveal that this injured worker has undergone any conservative treatment whatsoever. It states that she "continues to work." The request for MRI of the right ankle, without contrast is not medically necessary.

MRI of the right foot, without contrast.: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines, Ankle & foot

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 372 - 373.

Decision rationale: After careful review of the enclosed information and the pertinent MTUS guidelines for this case, the request for an MRI of the right foot without contrast is not medically necessary. The MTUS guidelines state, with regards to specialized studies such as MRI: 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, i.e., 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 noted on history or examination raises suspicion of a dangerous foot or ankle condition or of referred pain. In particular, patients who have suffered ankle injuries caused by a mechanism that could result in fracture can have radiographs if the Ottawa Criteria are met. This will markedly increase the diagnostic yield for plain radiography. It does not appear that this injured worker has gone through a period of

conservative care and observation. In fact, the one progress note enclosed in this case does not reveal that this injured worker has undergone any conservative treatment whatsoever. It states that she "continues to work." The request for MRI of the right foot, without contrast is not medically necessary.