

Case Number:	CM14-0156634		
Date Assigned:	09/26/2014	Date of Injury:	01/06/2011
Decision Date:	12/08/2014	UR Denial Date:	08/20/2014
Priority:	Standard	Application Received:	09/24/2014

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, the original date of injury for this patient is 1/6/2011. During a podiatry visit on 7/11/2014 the patient presents complaining of a painful right heel. The physical exam reveals significant pain upon palpation to the calcaneal body and plantar fascia right side. A local steroid injection to symptomatic area was initiated. On 8/1/2014 patient was again evaluated and notes that the injection during the prior visit helped only for a couple of weeks, and his pain is back to the right foot. Physical exam reveals pain upon palpation to the calcaneal body and plantar fascia right side. Patient received a taping to the right foot and a follow-up injection was recommended. Prior notes informed that patient has worn orthotics for his plantar fasciitis and heel pain. They have not alleviated his pain.

IMR ISSUES, DECISIONS AND RATIONALES

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

Podiatry follow-up visit 1 x 4: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints.

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

Decision rationale: After careful review of the enclosed information and the pertinent guidelines for this case, it is my feeling that the decision for podiatry follow-up visit 1 X 4 is not medically reasonable or necessary according to the guidelines for this patient at this time. The MTUS guidelines state clearly that physician follow-up is appropriate when a release to modified-, increased-, or full-duty work is needed, or after appreciable healing or recovery is expected. Later physician follow-up might be expected every four to seven days if the patient is off work and every seven to fourteen days if the patient is working. While podiatry follow-up to evaluate patient's heel pain is necessary, I feel it is unnecessary to speculate as to the number of follow-up visits needed. For this reason one more follow-up visit is reasonable for a second injection. Patient has already undergone orthotic therapy and one injection for the heel pain. Four follow-up visits may not be necessary.

Ultrasound guidance for needle: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints. Decision based on Non-MTUS Citation Wong SM, Li E, Griffith JF, Ultrasound guided injection of plantar fasciitis, *Ann Rheum Dis.* 2001 Jun;60(6):639

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Ultrasound-guided injections in rheumatology: Actual knowledge on efficacy and procedures Cited in Scopus: 3 Maria-Antonietta D'Agostino, Wolfgang A. Schmidt *Best Practice & Research Clinical Rheumatology*, Vol. 27, Issue 2, p283-294 Published in issue: April, 2013 Update on Evidence-Based Treatments for Plantar Fasciopathy Cited in Scopus: 0 David Berbrayer, Michael Fredericson *PM&R*, Vol. 6, Issue 2, p159-169 Published online: December 23, 2013

Decision rationale: After careful review of the enclosed information and the pertinent guidelines for this case, it is my feeling that the decision for ultrasound guidance for needle is not medically reasonable or necessary for this patient at this time. It is well-established in the literature and in the MTUS guidelines that local steroid injections are recommended for patients who suffer with painful plantar fasciitis. The guidelines are quiet, however, on the assistance of ultrasound guidance during these injections. A majority of the literature written on this subject notes that there is no increased efficacy to the injection when ultrasound guidance is used. In fact, local steroid injections given to the plantar heel or painful plantar fasciitis can be extremely effective without the use of ultrasound guidance.