

<b>Case Number:</b>	CM14-0157978		
<b>Date Assigned:</b>	10/01/2014	<b>Date of Injury:</b>	11/30/2010
<b>Decision Date:</b>	10/30/2014	<b>UR Denial Date:</b>	09/12/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/26/2014

### 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 Physical Medicine and Rehabilitation, has a subspecialty in Interventional Spine 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 54 year old with an injury date on 11/30/10. Patient complains of continuing bilateral elbow pain with numbness to pink/ring finger in bilateral hands, continuing cervical pain that radiates to bilateral upper extremities, and bilateral knee pain with left knee instability per 7/30/14 report. Patient has pain/numbness when resting his elbows, and has difficulty squatting/kneeling due to bilateral knee complaints per 7/30/14 report. Based on the 7/30/14 progress report provided by [REDACTED] the diagnoses are: 1. internal derangement of the knees bilaterally 2. impingement syndrome of the left shoulder 3. musculoligamentous strain of the cervical spine 4. musculoligamentous strain of the lumbar spine 5. a 3mm disc bulge at C5-6, C6-7 with moderate to severe stenosis Exam on 7/30/14 showed "C-spine decreased range of motion. Right knee has +2 effusion. Range of motion of right knee is -5 degrees to 120 degrees flexion. Positive straight leg raise." Patient's treatment history includes an EMG on 6/12/14. [REDACTED] is requesting synvisc one injection right knee. The utilization review determination being challenged is dated 9/12/14. [REDACTED] is the requesting provider, and he provided treatment reports from 3/19/14 to 7/30/14.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Synvisc One injection right knee:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee and Leg, Criteria for Hyaluronic acid injections

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Knee Chapter on hyaluronic acid injections

**Decision rationale:** This patient presents with bilateral elbow pain, neck pain bilateral upper extremity pain, bilateral knee pain per 7/30/14 report. and is s/p arthroscopic surgery (meniscectomy) of right knee from 5/6/14. The treater has asked for synvisc one injection right knee on 7/30/14. Review of the reports do not show any evidence of prior synvisc injections being done in the past. There are no x-rays or MRIs of the knee in provided documentation. Regarding hyaluronic acid injections, ODG recommends as a possible option for severe osteoarthritis for patients who have not responded adequately to recommended conservative treatments (exercise, NSAIDs or acetaminophen), to potentially delay total knee replacement. In this case, the patient does not have a diagnosis of osteoarthritis, nor does he presents with any symptoms that indicate such. The requested synvisc one injection right knee is not considered medically necessary at this time. Recommendation is for denial.