

Case Number:	CM14-0166867		
Date Assigned:	10/14/2014	Date of Injury:	09/07/1991
Decision Date:	11/17/2014	UR Denial Date:	09/15/2014
Priority:	Standard	Application Received:	10/09/2014

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 Orthopedic Surgery 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 claimant is a 43 year old female who injured her left foot at work on 09/07/91. The medical records provided for review documented current complaints of left ankle pain. The report of an MRI of the left ankle dated 02/25/14 identified a small effusion, and a sprain of the anterior talofibular ligament, calcaneal fibular ligament and deltoid ligament. There was a signal change in the left sinus tarsi, representing a sprain of the inner osseous ligaments. There was mild tendinosis of the peroneus brevis and cystic changes to the margin of the talus. The progress report dated 09/ 3/14 described continued complaints of pain and swelling. Physical examination revealed tenderness to palpation at the peroneal tendon sheaths and anterior plantar aspect of the calcaneus. The talofibular ligament was tender to touch. The claimant was diagnosed with "tendonitis" and documented to have failed conservative care. The recommendation was made for diagnostic arthroscopy with exploration, ligament repair and subtalar joint synovectomy.

IMR ISSUES, DECISIONS AND RATIONALES

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

Ankle Exploration: Upheld

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): 374.

Decision rationale: Based on the California ACOEM Guidelines, the request for ankle exploration is not recommended as medically necessary. The ACOEM Guidelines recommend surgical intervention of the ankle when there is clear clinical evidence of lesion that has shown to benefit in short and long term from surgical repair. The claimant has inflammatory findings according to the prior MRI scan with no documentation of internal derangement. The claimant does not have a diagnosis that would support the role of arthroscopy. The request in this case for exploration of the ankle would not be indicated.

Explore and repair ligaments: Upheld

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): 374-375.

Decision rationale: The California ACOEM Guidelines also would not support a ligamentous repair or reconstruction. While the claimant has inflammatory findings of the ligament on the MRI scan with tenderness to palpation on examination, there is no documentation of instability or imaging demonstrating instability that would require ligament repair or reconstruction. Given the claimant's current clinical presentation, this portion of surgical procedure would not be supported.

Subtalar Joint Synovectomy: Upheld

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): 374.

Decision rationale: The California ACOEM Guidelines would also not support a subtalar joint synovectomy. The surgical request for ligamentous reconstruction and exploration of the ankle have not been recommended as medically necessary. The request for the synovectomy portion of the surgical process also would not be indicated without documentation of the need for the exploration procedure.