

Case Number:	CM14-0167534		
Date Assigned:	10/14/2014	Date of Injury:	11/08/2012
Decision Date:	11/17/2014	UR Denial Date:	10/01/2014
Priority:	Standard	Application Received:	10/10/2014

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 Geriatrics 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:

The injured worker is a 57-year-old woman with a date of injury of 1/8/12. She was seen by her primary treating physician on 9/22/14 with complaints of pain in her shoulders, knees, wrists and hands. She has received both physical and aquatic therapy in the past. She underwent right shoulder surgery in 1/14 and left shoulder surgery in 6/14. She noted that Voltaren gel helped with her knee pain. Her physical exam showed range of motion of the knees from 0 - 120 degrees bilaterally. She had bilateral medial joint line tenderness with pain and popping with McMurray's test and retropatellar crepitation and mild swelling. Her diagnosis related to her knees was bilateral chondromalacia patella rule out internal derangement of the knees. At issue in this review is the request for MRI of the bilateral knees.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI of the bilateral knees: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints
Page(s): 335-339.

Decision rationale: The request in this injured worker with chronic knee pain is for MRI of both knees. The records document a physical exam with reduction in range of motion and popping with McMurray's sign but no red flags or indications for immediate referral or imaging. MRI can help to identify anatomic defects such as meniscus or ligament tears. In the absence of physical exam evidence of red flags or physical exam evidence of an anatomic abnormality, the requested MRI of both knees is not medically substantiated.