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| <b>Case Number:</b>   | CM14-0171281 |                              |            |
| <b>Date Assigned:</b> | 10/23/2014   | <b>Date of Injury:</b>       | 04/22/2014 |
| <b>Decision Date:</b> | 12/04/2014   | <b>UR Denial Date:</b>       | 10/09/2014 |
| <b>Priority:</b>      | Standard     | <b>Application Received:</b> | 10/16/2014 |

### 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 29-year old with an injury date on 4/22/14. Patient complains of persistent left ankle pain rated 7/10, lower back pain with radiation down the left leg with numbness per 8/21/14 report. Patient had . Based on the 8/21/14 progress report provided by [REDACTED] the diagnosis is left ankle sprain. Exam on 8/21/14 showed "abnormal heel-toe walk. Tenderness to palpation about entire aspect of left ankle." No range of motion testing was provided in included reports. Patient's treatment history includes physical therapy (5 sessions) with mild pain reduction, and medications. [REDACTED] is requesting Xray three views of left ankle. The utilization review determination being challenged is dated 10/9/14. [REDACTED] is the requesting provider, and he provided treatment reports from 4/22/14 to 8/21/14.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**X-ray three views of left ankle:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines: Ankle & Foot - Radiography

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Ankle Chapter, Radiography

**Decision rationale:** This patient presents with left ankle pain, lower back pain, and left leg pain. The treater has asked for X-Ray 3 Views of Left Ankle on 8/21/14. The 7/23/14 report states patient had "excessive amounts of bruising and swelling following the injury. Unable to bear weight on the affected ankle for approximate 2-3 weeks." Review of the reports do not show any evidence of ankle X-rays being done in the past. Regarding ankle X-rays, ODG recommends as indicated below. If a fracture is considered, patients should have radiographs if the Ottawa ankle criteria are met. Radiographic evaluation may also be appropriate if there is rapid onset of swelling and bruising, if the patient is older than 55 years, or in the case of obvious dislocation. Plain films are routinely obtained to exclude arthritis, infection, fracture, or neoplasm. In this case, the patient had severe bruising/swelling, as well as inability to bear weight on the left ankle following the original injuries, which are red flags for ankle radiographs per ODG guidelines. Therefore, X-ray three views of left ankle is medically necessary. In this case, the patient had severe bruising/swelling, as well as inability to bear weight on the left ankle following the original injury, which are red flags for ankle radiographs per ODG guidelines. Recommendation is for authorization.