

Case Number:	CM14-0175370		
Date Assigned:	10/28/2014	Date of Injury:	09/15/2010
Decision Date:	12/05/2014	UR Denial Date:	10/02/2014
Priority:	Standard	Application Received:	10/23/2014

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 & 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 51 years old female with an injury date on 09/15/2010. Based on the 09/12/2014 progress report provided by [REDACTED], the diagnoses are: 1. Complex regional syndrome, bilateral lower extremities 2. Chronic intractable pain, undergoing multimodal medical management. 3. Spinal cord stimulation. 4. Chronic left foot osteomyelitis recently completed 60 sequential hyperbaric treatments with dramatic functional improvement and healing of the left foot with new skin breakdown noted at today's visit. 5. Hypertension secondary to complex regional pain syndrome. 6. Nonambulatory status secondary to complex regional pain syndrome. 7. Delayed gastric emptying possibly secondary to opioids use to treat complex regional pain syndrome. 8. Adrenal insufficiency following MRSA sepsis related to complex regional pain syndrome. 9. Possible right lower extremity DVT, recent duplex study negative three months ago. According to this report, the patient complains of "industrial left lower extremity pain." The patient is "concern about the wound on her left foot, which has been completely healed and now has some breakdown." Physical exam reveals wound "completely epithelized over the dorsum of the left has some small areas of 1 to 3 mm in diameter primary skin breakdown without evidence of infection, subcutaneous fluid collection, or drainage." There were no other significant findings noted on this report. The utilization review denied the request on 10/02/2014. [REDACTED] is the requesting provider, and he provided treatment reports from 05/19/2014 to 09/12/2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Wound Care: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Foot and Ankle Chapter, Wound Dressings

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 8-9.

Decision rationale: According to the 09/12/2014 report by [REDACTED] this patient presents with "industrial left lower extremity pain." The treater is requesting wound care x2. The utilization review modifies the request for wound care to 1 visit. Review of report show a "completely healed" and now has some skin breakdown of the left foot. MTUS page 8 requires that the treater provide monitoring of the patient's progress and make appropriate recommendations. In this case, patient's wound has healed completely with "no without evidence of infection, subcutaneous fluid collection, or drainage." However, some fresh skin breakdown was noted for which would care was requested. Given the patient's history of skin infection, 2 visits to wound care would appear reasonable. The request is medically necessary.