

Case Number:	CM14-0181615		
Date Assigned:	11/06/2014	Date of Injury:	07/29/2013
Decision Date:	12/12/2014	UR Denial Date:	10/03/2014
Priority:	Standard	Application Received:	10/31/2014

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 Pain Medicine 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:

This is a patient with a date of injury of July 29, 2013. A utilization review determination dated October 3, 2014 recommends noncertification for an MRI of the right elbow. Noncertification was recommended due to a lack of clarity regarding what specific diagnosis is being evaluated with the requested MRI. A progress report dated November 17, 2014 identifies subjective complaints of right upper extremity pain rated as 8/10 without medication and 2/10 with medication. She continues to have numbness and tingling in the 4th and 5th fingers. Physical examination findings revealed tenderness over the medial at the condyle with some swelling and positive Tinel's sign at the elbow. She has full range of motion at the elbow and decreased sensation of the 3rd, 4th, and 5th digits. There is restricted range of motion in the wrist and weak grasp. An MRI of the wrist in September 2013 identifies a sprain injury to the volar compartment of the scapholunate ligament. The treatment plan recommends an updated MRI and EMG of the right wrist. An orthopedic consultation is recommended. The patient is noted as having carpal tunnel on EMG and medial epicondylitis. The physician feels that there is "more going on with the wrist, but we can let the orthopedist figure it out." A progress report dated October 22, 2014 states that the patient has symptoms of ulnar neuropathy and recommends a repeat EMG and MRI. A progress report dated September 24, 2014 states that the patient was evaluated by a hand surgeon. The treatment recommends an MRI of the elbow due to swelling of the medial of the condyle with significant tenderness.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI (magnetic resonance imaging) of right elbow: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 10 Elbow Disorders (Revised 2007). Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Elbow

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 269. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Elbow Chapter, MRIs

Decision rationale: Regarding the request for MRI of the elbow, California MTUS supports imaging studies to clarify the diagnosis if the medical history and physical examination suggest specific disorders. ODG supports the use of MRI of the elbow for chronic pain when plain film radiographs are negative and specific disorders are being considered. Within the documentation available for review, the diagnoses being suggested by the treating physician include ulnar neuropathy and medial epicondylitis. These problems generally do not require MRI for diagnosis. Additionally, guidelines support the use of elbow imaging for chronic pain when plain films are nondiagnostic. No plain film radiographs have been included for review, and there is no suggestion of any diagnoses for which urgent MRI of the elbow would be indicated. In the absence of clarity regarding those issues, the currently requested MRI of the elbow is not medically necessary.