

Case Number:	CM14-0182256		
Date Assigned:	11/07/2014	Date of Injury:	01/01/2000
Decision Date:	12/12/2014	UR Denial Date:	10/17/2014
Priority:	Standard	Application Received:	11/03/2014

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 52 year old female with an injury date of 01/01/00, Based on the 10/09/14 progress report provided by [REDACTED] the patient complains of pain, swelling and numbness to the right elbow, wrist and hand. Physical examination to the upper extremities revealed mild trapezial and paracervical tenderness, and slight tenderness over the medial aspect of the right elbow with a mildly hypertrophic scar. Negative Tinel's and elbow flexion tests at the cubital channels. Mild swelling, stiffness and diminished sensation in the ulnar nerve distribution in the right hand. Tinel's Sign and Phalen's tests are negative at the carpal tunnels. Slight tenderness over the dorsal ulnar aspect of the left wrist. 42 PT reports from 04/22/14 - 09/09/14 have been submitted. Treater states the patient "would benefit from a compression glove for her right hand swelling."Diagnosis 10/09/14- Status post revision right cubital tunnel release- Status post left cubital release with submuscular transposition- Status post bilateral carpal tunnel releases- Right lateral epicondylitis- Trapezial and paracervical strain [REDACTED] [REDACTED] is requesting right hand compression glove. The utilization review determination being challenged is dated 10/17/14. [REDACTED] is the requesting provider and he provided treatment reports from 03/27/13 -10/09/14.

IMR ISSUES, DECISIONS AND RATIONALES

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

Right hand compression glove: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Carpal Tunnel Syndrome (Acute & Chronic) chapter, Splinting

Decision rationale: The patient presents with pain, swelling and numbness to the right elbow, wrist and hand. The request is for right hand compression glove. Per diagnosis dated 10/09/14, the patient is status post revision right cubital tunnel release, left cubital release with submuscular transposition and bilateral carpal tunnel releases. MTUS and ACOEM are silent regarding the request. ODG does not directly address the request for a compression glove, however the following is stated:ODG Guidelines, Carpal Tunnel Syndrome (Acute & Chronic) chapter, Splinting states: Wrist splinting after CTR: " Splinting after surgery has negative evidence. Two prospective randomized studies show that there is no beneficial effect from postoperative splinting after carpal tunnel release when compared to a bulky dressing alone. In fact, splinting the wrist beyond 48 hours following CTS release may be largely detrimental, especially compared to a home physical therapy program. "Per progress report dated 10/09/14, treater states the patient "would benefit from a compression glove for her right hand swelling." However, based on guidelines, splinting the wrist may be detrimental; therefore using a compression glove would not be beneficial for the patient therefore request is not medically necessary.Per progress report dated 10/09/14, treater states the patient "would benefit from a compression glove for her right hand swelling." However, based on guidelines, splinting the wrist may be detrimental, therefore using a compression glove would not be beneficial for the patient. Recommendation is for denial.