

Case Number:	CM14-0182471		
Date Assigned:	11/07/2014	Date of Injury:	02/22/2013
Decision Date:	12/11/2014	UR Denial Date:	10/01/2014
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 Neuromuscular Medicine and is licensed to practice in Maryland. 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 47 year old female who had a work injury dated 2/22/13. The diagnoses include status post left knee arthroscopic surgery; status post left wrist arthroscopic surgery, mild left cervical spine radiculopathy, and moderate bilateral carpal tunnel syndrome, numbness, and weakness, chronic cervical myofascial pain syndrome, post traumatic headaches and dizziness. Under consideration are requests for swimming pool exercises on a daily basis for left knee in 4 weeks. Per documentation the patient had bilateral upper extremity electromyogram/nerve conduction velocity studies performed 9/5/14 revealed chronic denervation in the left deltoid muscle most likely due to left C5 radiculopathy. Evidence of moderate bilateral carpal tunnel syndrome. The patient presented with complaints of continued headaches although they have been less intense with new medications, frequent neck pain with numbness in the left upper extremity and sometimes in her right hand. The patient reports her pain is affecting her daily activities, concentration, and mildly impacting her ability to interact with other people. On examination there is reduced cervical range of motion was slightly restricted in all planes, multiple myofascial trigger points and taut bands noted throughout the cervical paraspinal, trapezius, levator scapulae, 4th digits of the left hand, grip strength was decreased in the left hand at +4/5. The treatment plan included continue medications as directed, home exercise program, aquatic therapy, follow up in 4 weeks, continue to work with modifications, request for cervical MRI due to abnormal electromyogram, continue deep breathing /meditation relaxation techniques.

IMR ISSUES, DECISIONS AND RATIONALES

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

Swimming pool exercises on a daily basis for left knee in 4 weeks: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Physical Medicine, Aquatic Therapy Page(s): 98-99, 22.

Decision rationale: Swimming pool exercises on a daily basis for left knee in 4 weeks is not medically necessary per the MTUS Chronic Pain Medical Treatment Guidelines. The documentation does not indicate that the patient is unable to perform land based therapy. Additionally the patient has had prior supervised physical therapy and it is unclear why the patient needs more supervised therapy sessions. The guidelines recommend up to 10 visits for this condition. It is unclear how many prior therapy sessions the patient has had and the outcome of this therapy. For all of these reasons the request for swimming pool exercises on a daily basis for left knee in 4 weeks is not medically necessary.