MAXIMUS Federal Services

| Case Number: | CM14-0184052 | | |
|---|---|---|---|
| Date Assigned: | 11/10/2014 | Date of Injury: | 07/22/2013 |
| Decision Date: | 12/18/2014 | UR Denial Date: | 10/28/2014 |
| Priority: | Standard | Application Received: | 11/05/2014 |

## 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 Occupational 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:

The applicant is a represented [redacted] employee who has filed a claim for a right index finger collateral ligament contusion injury of July 22, 2013. The applicant has been treated with the following: Analgesic medications; unspecified amounts of physical and occupational therapy; work restrictions; and splinting. In a Utilization Review Report dated October 27, 2014, the claims administrator denied a request for a Dynasplint brace involving the PIP joint. The UR report was quite difficult to follow and comprised, in large part, of historical Utilization Review Reports. The claims administrator stated that it was denying the request, in part, on reported lack of range of motion measurements. The applicant's attorney subsequently appealed. In a May 23, 2014 progress note, the applicant reported persistent complaints of index finger digit swelling. Range of motion was within normal limits, albeit painful. A right ulnar collateral ligament repair of the index finger MCP joint was sought. Additional physical therapy was also endorsed while the applicant was placed off of work, on total temporary disability. On July 28, 2014, the applicant did undergo an ulnar collateral ligament proximal interphalangeal joint of the right index finger reconstruction surgery to ameliorate a preoperative diagnosis of instability of ulnar collateral ligament, PIP joint of the second finger of the right hand. On September 26, 2014, the applicant reported persistent complaints of pain and stiffness about the right second digit, exacerbated by gripping and grasping activities. Some swelling was appreciated about multiple digits with range of motion of that of the right second digit quite limited. A Dynasplint PIP flexion brace was sought while the applicant was kept off of work. In a medical-legal evaluation dated October 6, 2014, the medical-legal evaluator noted that the applicant was a sworn peace officer. It was stated that the applicant had not worked since March 7, 2014. The medical-legal evaluator suggested that special splinting would be helpful in ameliorating the applicant's range of motion.

## IMR ISSUES, DECISIONS AND RATIONALES

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

**Dynasplint brace PIP:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG)

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Practice Guidelines, Third Edition, Extension Splinting section. ODG Hand, Wrist, and Forearm Chapter, Static Progressive Stretch Therapy topic

**Decision rationale:** The California Medical Treatment Utilization Schedule (MTUS) does not address the topic. However, the Third Edition American College of Occupational and Environmental Medicine (ACOEM) Guidelines note that extension splinting is "moderately recommended" for applicants with a mallet finger, a condition which is essential analogous to the diagnosis of joint contracture seemingly present here. Similarly, Official Disability Guidelines (ODG) Hand, Wrist, and Forearm Chapter Static Progressive Stretch Therapy topic notes that static progressive stretch therapies such as Dynasplinting can be employed to ameliorate issues with joint stiffness and/or joint contractures in order to increase an applicant's range of motion. Here, the applicant does have residual joint stiffness following earlier hand surgery of July 28, 2014. Stiffness at the PIP joint of the right second digit was appreciated on a September 26, 2014 progress note and October 6, 2014 medical-legal evaluation, referenced above. As suggested both by the treating provider and the medical-legal evaluator, the Dynasplint brace device may facilitate some amelioration of the applicant's range of motion and associated PIP joint stiffness. Therefore, the request is medically necessary.