

Case Number:	CM14-0185451		
Date Assigned:	11/13/2014	Date of Injury:	01/17/2012
Decision Date:	12/16/2014	UR Denial Date:	10/09/2014
Priority:	Standard	Application Received:	11/06/2014

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 Family Practice 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 43 year old male claimant sustained a work injury on July 17, 2012 involving the right knee and left middle finger. He was diagnosed with chronic knee pain and finger pain. A magnetic resonance imaging (MRI) of the right knee in 2012 showed a meniscal tear. He had undergone surgery for his right knee. A progress note on September 24, 2014 indicated the claimant had 5 - 8/10 pain in the right knee. Examination of the right knee showed mild tenderness in the medial joint line and lateral joint line. The treating physician requested a knee brace.

IMR ISSUES, DECISIONS AND RATIONALES

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

Knee Brace: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints. Decision based on Non-MTUS Citation ODG, Knee brace

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 346.

Decision rationale: According to the guidelines, knee braces and orthosis are not recommended for prophylaxis or for prolonged periods for an anterior cruciate ligament (ACL) tear. The

claimant's injury was not acute and he did not have the above diagnoses. The request for a knee brace is not medically necessary.