

Case Number:	CM14-0026474		
Date Assigned:	06/25/2014	Date of Injury:	09/25/2003
Decision Date:	07/29/2014	UR Denial Date:	02/24/2014
Priority:	Standard	Application Received:	03/03/2014

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 Orthopedic Surgery 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 40-year-old female claimant with industrial injury of 9/25/03. The claimant is status post multiple left ankle arthroscopic surgeries, and status post debridement, synovectomy and exploration of ankle joint on 7/21/11. Computed tomography (CT) arthrogram of the left ankle on 7/15/13 demonstrates no filling defect in the ankle joint to suggest chondral or osteochondral bodies. The exam note 2/12/14 demonstrates patient with flare five weeks prior with increasing pain along the medial malleolar region with standing or walking. Use of a removable boot is demonstrated in the notes. Objective findings of the left ankle include anterior and medial ankle tenderness at the tip of the medial malleolus and report of marked limitation in ankle dorsiflexion with pain. Radiographic examination from 2/12/14 demonstrates report of persistent avulsion fracture off the tip of the medial malleolar region consistent with CT scan findings.

IMR ISSUES, DECISIONS AND RATIONALES

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

Prospective request for one (1) excision of painful avulsion fragment off the medial malleolus: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 374-375. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Ankle & Foot (Acute & Chronic).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Ankle and Foot, Arthroscopy.

Decision rationale: The CA MTUS/ACOEM is silent on the issue of ankle avulsion fracture debridement. Per the Official Disability Guidelines (ODG) Ankle and Foot criteria, "Ankle arthroscopy for ankle instability, septic arthritis, arthrofibrosis, and removal of loose bodies is supported with only poor-quality evidence. Except for arthrodesis, treatment of ankle arthritis, excluding isolated bony impingement, is not effective and therefore this indication is not recommended. Finally, there is insufficient evidence-based literature to support or refute the benefit of arthroscopy for the treatment of synovitis and fractures." In this case, there is no evidence in the cited records from 2/12/14 of significant pathology to warrant surgical care. The ODG criteria cited reports poor quality evidence supporting surgery for loose body removal. Therefore, the determination is for non-certification.

Prospective request for eight (8) post-op physical therapy sessions: 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), Ankle and Foot, Arthroscopy.

Decision rationale: Since the primary procedure (Prospective request for one (1) excision of painful avulsion fragment off the medial malleolus) is not medically necessary, none of the associated services (Prospective request for eight (8) post-op physical therapy sessions) are medically necessary.