

Case Number:	CM14-0027330		
Date Assigned:	03/07/2014	Date of Injury:	11/29/2012
Decision Date:	05/27/2014	UR Denial Date:	12/27/2013
Priority:	Standard	Application Received:	01/13/2014

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 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:

According to the records made available for review, this is a 48-year-old female with a 11/29/12 date of injury. At the time (10/14/13) of request for authorization for ankle wrap, there is documentation of subjective (low back, right hip, and right knee pain) and objective (tenderness over the posterior superior iliac spine bilaterally) findings, current diagnoses (right ankle ligamentous injury and effusion right ankle), and treatment to date (medications). There is no documentation of an acute injury or ankle sprain.

IMR ISSUES, DECISIONS AND RATIONALES

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

ANKLE WRAP: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College Of Occupational and Environmental Medicine (ACOEM), Occupational Medicine Practice Guidelines, 2nd Edition, 2008, Ankle and Foot Complaints, Page 1044-1046.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 376-377. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Ankle and Foot, Elastic bandage (immobilization).

Decision rationale: MTUS reference to ACOEM guidelines identifies immobilization and weight bearing as tolerated for acute injuries, taping or bracing later to avoid exacerbation or for prevention. MTUS additionally identifies that prolonged supports or bracing without exercise is not recommended. ODG identifies documentation of ankle sprain as criteria necessary to support the medical necessity of functional treatment options (elastic bandaging, soft casting, taping, or orthoses with associated coordination training). Within the medical information available for review, there is documentation of diagnoses of right ankle ligamentous injury and effusion right ankle. However, given documentation of an 11/29/12 date of injury, there is no documentation of an acute injury. In addition, despite documentation of diagnoses of right ankle ligamentous injury and effusion right ankle, there is no documentation of ankle sprain. Therefore, based on guidelines and a review of the evidence, the request for ankle wrap is not medically necessary.