

Case Number:	CM14-0030259		
Date Assigned:	06/20/2014	Date of Injury:	11/12/2013
Decision Date:	07/17/2014	UR Denial Date:	02/07/2014
Priority:	Standard	Application Received:	03/10/2014

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 Texas and Oklahoma. 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 injured worker is a 25-year-old male with a reported date of injury on 11/12/2013. The injury reportedly occurred when the injured worker had repetitive motion rotating his hands for a camera at the gaming table which caused arm pain. His previous treatments were noted to include physical therapy, a wrist splint, and medication. His diagnoses were noted to include right cubital tunnel syndrome; cumulative trauma for repetitive motion to the right arm. The injured worker was given an elbow brace on 11/14/2013. The progress note dated 12/05/2013 reported a counterforce brace was given to the injured worker by physical therapy. The progress note dated 01/09/2014 reported the injured worker complained of constant right arm pain that was aggravated by moving around and it was caused from doing the Jamar test on a previous visit. The injured worker stated it felt like something was tightening around his bone. The physical examination reported tenderness to touch and pain and swelling over the brachioradialis, as well as tenderness to the mid upper arm and dorsal forearm. There was decreased range of motion noted to the forearm and decreased strength from 3/5 to 4/5, as well as decreased sensation to the dorsal hand. The range of motion was diminished to the elbow and wrist. The request of authorization form dated 01/31/2014 is for a carpal tunnel brace and a cubital tunnel brace to be dispensed in the office due to right cubital tunnel syndrome and lateral epicondylitis and wrist pain.

IMR ISSUES, DECISIONS AND RATIONALES

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

Left wrist brace and elbow brace: Upheld

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 272..

Decision rationale: The request for a left wrist brace and elbow brace is non-certified. The injured worker was issued a wrist brace and elbow brace by the physician in 09/2013 and 11/2013. There was also a documentation of the injured worker receiving an elbow brace from physical therapy in 12/2013. The California MTUS/ACOEM Guidelines state that splinting is optional for all subacute and chronic hand, wrist, and forearm disorders. However, prolonged splinting leads to weakness and stiffness and therefore is an optional treatment of any forearm, wrist, or hand disorder. The documentation provided states the injured worker received the braces from previous visit notes; neither ACOEM, nor Official Disability Guidelines address the issue of replacing those items. The medical practice standards of care make it reasonable to require documentation of a clear rationale for the replacement of durable medical equipment already in use (such a malfunctioning or broken DME supply). Therefore, the request is non-certified.