

<b>Case Number:</b>	CM14-0031809		
<b>Date Assigned:</b>	06/20/2014	<b>Date of Injury:</b>	09/18/2006
<b>Decision Date:</b>	07/21/2014	<b>UR Denial Date:</b>	03/05/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/13/2014

### 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 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 chronic knee pain reportedly associated with an industrial injury of September 18, 2006. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representation; total knee arthroplasty surgery; transfer of care to and from various providers in various specialties; and extensive periods of time off of work. In a Utilization Review Report dated March 12, 2014, the claims administrator denied a request for a continuous passive motion (CPM) machine on the grounds that the claims administrator reportedly spoke with the attending provider and that the attending provider reportedly withdrew the request. The applicant's attorney subsequently appealed. In a progress note dated May 22, 2014, the applicant was placed off of work, on total temporary disability. The applicant was described as having failed a total knee arthroplasty and was pending a subsequent revision. On April 24, 2014, the applicant was again placed off of work, on total temporary disability. The applicant had comorbid hypertension, it is stated. The applicant was given a handicap placard. The applicant was described as weighing 189 pounds. It appears that the continuous passive motion (CPM) device was requested via a request for authorization form dated February 24, 2014. On January 27, 2014, the applicant was described as possessing 0 to 100 degrees of knee range of motion. Similarly, on March 19, 2014, the applicant was again described as possessing 0 to 100 degrees of knee range of motion.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Durable Medical Equipment CPM knee-Right:** Upheld

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

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Practice Guidelines, Third Edition, Knee Chapter, Postoperative Rehabilitation for Knee Arthroplasty section.

**Decision rationale:** The MTUS does not address the topic of continuous passive motion device following a total knee arthroplasty surgery, as is being proposed here. As noted in the Third Edition Guideline, continuous passive motion (CPM) is not routinely recommended in applicants undergoing total knee arthroplasty. While continuous passive motion, per ACOEM, may be recommended for select, substantially inactive applicants postoperatively, in this case, however, there is no mention of the applicant being substantially inactive or immobile. If anything, the limited information on file suggested that the applicant has succeeded in losing weight and only weighs 189 pounds. There was no evidence that the applicant would have difficulty participating in conventional postoperative physical therapy. Therefore, the request is not medically necessary.