

<b>Case Number:</b>	CM14-0036450		
<b>Date Assigned:</b>	06/25/2014	<b>Date of Injury:</b>	01/30/2013
<b>Decision Date:</b>	09/10/2014	<b>UR Denial Date:</b>	02/18/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/25/2014

### 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 January 30, 2013. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representation; transfer of care to and from various providers in various specialties; reported diagnosis with knee arthritis; unspecified amounts of physical therapy; and earlier viscosupplementation injections. In a utilization review report dated February 18, 2014, the claims administrator apparently denied a request for knee corticosteroid injection/knee drain/inject joint and bursa. Despite the fact that the MTUS addressed the topic, the claims administrator invoked non-MTUS ODG Guidelines. The applicant's attorney subsequently appealed. In a February 10, 2014 progress note, the applicant presented with persistent complaints of knee pain secondary to tricompartmental osteoarthritis. The applicant apparently failed to return to work, it was stated. The applicant presented reporting a flare of pain associated with chasing cows on his personal ranch. The applicant stated that he was concerned about his failure to return to work. A small knee effusion, medial joint line tenderness, and limited range of motion was noted about the injured knee. The applicant was asked to obtain corticosteroid injection to the knee. An ultrasound-guided request was sought owing to the applicant's size. The applicant weighed 320 pounds.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Drain/inject joint/bursa:** Overturned

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

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 13 Knee Complaints  
Page(s): Table 13-6, page 346.

**Decision rationale:** As noted in the MTUS-adopted ACOEM Guidelines in Chapter 13, Table 13-6, aspiration of TENS acute effusion and/or aspiration of a TENS prepatellar bursa is "recommended." In this case, the applicant has apparently developed synovitis/bursitis/knee effusion associated with a flare of knee arthritis, apparently precipitated by chasing cows around his ranch. The applicant did present to the clinic setting with an acute flare in pain and associated with swelling and effusion appreciated on exam. Aspiration and injection of the effusion and injection of the joint are therefore indicated. Accordingly, the request is medically necessary.