

Case Number:	CM14-0038042		
Date Assigned:	06/25/2014	Date of Injury:	08/30/2004
Decision Date:	08/05/2014	UR Denial Date:	03/12/2014
Priority:	Standard	Application Received:	04/01/2014

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 licensed in Podiatric surgery, and is licensed to practice in New York. 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 enclosed information this patient had a BL foot injury at work on 8/30/2004. On 12/20/2013 this patient was seen by his podiatrist for evaluation of left heel pain. Pain is also noted to the balls of both feet. Musculoskeletal exam reveals a positive Tinel's sign to the tarsal tunnel bilaterally with plantar calluses sub fifth metatarsals bilateral. Diagnoses include plantar keratoma's, fibrotic scar, plantar fasciitis, compression arthralgia of foot and ankle, and sprained metatarsal phalangeal joint. During this visit the physician has recommended a series of alcohol based nerve block injections to his tarsal canal, sural nerve, and superficial peroneal nerve to both ankles.

IMR ISSUES, DECISIONS AND RATIONALES

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

21 Right foot alcohol based nerve blocks to the tarsal canal, sural nerve, and superficial peroneal nerve 3 times a week for 7 weeks: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 371. Decision based on Non-MTUS Citation Tarsal Tunnel Syndrome Treatment & Management, E-Medicine. Ultrasound Guided Alcohol Ablation of Morton's Neuroma. Foot & Ankle International March 2012 vol. 33 no. 3, pages 196-201.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 371.

Decision rationale: After careful review of the enclosed information and the pertinent MTUS guidelines for this case, it is my feeling that the decision for 21 right foot alcohol based nerve blocks to the tarsal canal, Searle nerve, and superficial peroneal nerve three times a week 47 weeks is not medically reasonable or necessary at this time. The MTUS guidelines state that : Invasive techniques (e.g., needle acupuncture and injection procedures) have no proven value, with the exception of corticosteroid injection into the affected web space in patients with Morton's neuroma or into the affected area in patients with plantar fasciitis or heel spur if four to six weeks of conservative therapy is ineffective. The progress notes do not advise that this patient is suffering with a Morton's neuroma. Furthermore, the injections that are requested are alcohol based, not corticosteroid base. These types of injections for the particular diagnoses stated by the physician do not meet MTUS guidelines. Decision for 21 right foot alcohol based blocks to the tarsal canal, searle nerve, and superficial peroneal nerve three times a week for 47 weeks is not medically necessary.