

Case Number:	CM14-0047821		
Date Assigned:	07/02/2014	Date of Injury:	08/28/1996
Decision Date:	08/26/2014	UR Denial Date:	03/19/2014
Priority:	Standard	Application Received:	04/15/2014

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:

This is a 62-year-old female with a 8/28/96 date of injury. The injury occurred when she was stocking a cold box with a foot stool and the cart gave out. She ended up injuring her knee. According to a 3/9/14 progress note, the patient stated that her pain was at 4/10 on a pain scale of 0-10 but can go up to an 8/10 without medications. Objective findings: full range of motion of the lumbar spine without pain and increased flexion, extension, side bending, and rotation; tenderness throughout the medial and lateral sides of the right knee; full range of motion of both knees.; some tenderness over the left Achilles tendon. Diagnostic impression: arthritis of the right knee status post 3 surgeries and revision, mild left Achilles tendinitis. Treatment to date: medication management, activity modification, multiple surgical interventions, physical therapy. A UR decision dated 3/19/14 denied the request for Three Phase Bone Scan of the Right Knee. Guidelines state a bone scan may be reasonable as a screening test for patients with pain following the arthroplasty after a negative radiograph or loosening and a negative aspiration for infection is noted. Moreover, there is no clear indication the patient has undergone radiographic studies to determine loosening of the implant or that the patient has undergone aspiration of the knee to rule out infection.

IMR ISSUES, DECISIONS AND RATIONALES

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

Three Phase Bone Scan of the Right Knee: Upheld

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee and Leg Chapter.

Decision rationale: California Medical Treatment Utilization Schedule (MTUS) does not address this issue. Official Disability Guidelines (ODG) recommends bone scans after total knee replacement if pain caused by loosening of implant suspected. In pain after total knee arthroplasty, after a negative radiograph for loosening and a negative aspiration for infection, a bone scan is a reasonable screening test. According to a progress noted dated 3/4/14, she had a partial knee replacement done in 2002 and a total knee replacement done in 2008. In 2008, the story was that they did a bone scan and showed that the implant was loose. A revision was done in 2011. She continued to have pain and swelling, but the doctor said the implant was fine. It is unclear why a bone scan is being requested at this time if there is no documentation of loosening of the implant following a total knee replacement. In addition, there is no documentation that the patient has undergone a radiographic study to determine if there is in fact loosening of the implant. Therefore, the request for Three Phase Bone Scan of the Right Knee was not medically necessary.