

Case Number:	CM14-0049035		
Date Assigned:	06/20/2014	Date of Injury:	12/19/2013
Decision Date:	07/18/2014	UR Denial Date:	03/05/2014
Priority:	Standard	Application Received:	03/18/2014

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 Orthopedic Surgery 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 54 year old claimant had a reported industrial injury on 12/19/13. An exam note from 2/11/14 demonstrates left ankle pain. Report is made of extensive bone marrow edema of the medial talus, grade 2 strain of deltoid ligament, partial avulsion of tarsal navicular tuberosity and mild bone marrow edema of medial malleolus and anterior distal tibia. The report states that patient has been non-weight bearing for 9 weeks with persistent pain and swelling. The report states that patient has failed medications, bracing and crutches without improvement. The report states 5/5 pain is demonstrated with palpation of the deltoid ligament.

IMR ISSUES, DECISIONS AND RATIONALES

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

One left ankle surgery to repair avulsed deltoid ligament with a deltoid plate: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 374-375.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 374-375.

Decision rationale: According to the California MTUS ACOEM guidelines, pg 374-375, a referral for surgical consultation may be indicated for patients who have activity limitation for more than one month without signs of functional improvement, failure of exercise programs to

increase range of motion and strength of the musculature around the ankle and foot, and clear clinical and imaging evidence of a lesion that has been shown to benefit in both the short and long term from surgical repair. The guidelines go onto to recommend referral for early repair of ligament tears is controversial and not common practice. Repairs are recommended for chronic instability. In this case there is insufficient evidence of the exam note from 2/11/14 of significant instability in the ankle. There is lack of documentation of failure of physical therapy or exercise program for the patient's ankle pain. Therefore the guideline criteria have not been met and determination is for not medically necessary.