

Case Number:	CM14-0055632		
Date Assigned:	07/09/2014	Date of Injury:	03/14/2012
Decision Date:	08/21/2014	UR Denial Date:	03/25/2014
Priority:	Standard	Application Received:	04/24/2014

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:

This 64-year-old sustained an industrial injury on March 14, 2013. Injury occurred with a sliding refrigerator door fell on the dorsum of his foot. He was diagnosed with a hallux fracture. The August 13, 2013 right foot x-ray report documented narrowing at the first interphalangeal (IP) joint space and an ossicle medially. The April 30, 2013 MRI of the right foot impression documented osteoarthritic changes in the first metatarsophalangeal joints. The January 28, 2014 treating physician report cited grade 7/10 hallux pain. The patient was wearing a Croc shoe. Physical exam documented pain to palpation at the interphalangeal joint and stiff motion. Circulation, sensation, and motor were intact. The treatment plan recommended fusion of the interphalangeal joint of the hallux. The patient was working full duty. The March 25, 2014 utilization review denied the request for right hallux arthrodesis as guideline criteria were not met relative to conservative treatment, clear subjective findings, range of motion and clarification of imaging findings.

IMR ISSUES, DECISIONS AND RATIONALES

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

Right toes, hallux arthrodesis, joint fusion at the 1st interphalangeal,: 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 The Expert Reviewer based his/her decision on the Non-MTUS article "Arthrodesis Most Reliable Technique to Treat Hallux Rigidus", from the Journal of Foot Ankle Surgery, by Erdil M. 2013; doi: 10.1053/j.jfas.2013.03.014.

Decision rationale: The California MTUS and Official Disability Guidelines (ODG) do not specifically address hallux arthrodesis. Peer-reviewed evidence indicate that arthrodesis is the most reliable surgical procedure for hallux rigidus. However, it should be used only as a salvage procedure in the treatment of high-grade hallux rigidus. Guideline criteria have not been met. There is no detailed documentation that recent comprehensive pharmacologic and non-pharmacologic conservative treatment had been tried and failed. There is no clear radiographic documentation of the level of osteoarthritic changes. Therefore, this request for right hallux arthrodesis, joint fusion 1st interphalangeal, is not medically necessary or appropriate.