

Case Number:	CM14-0073637		
Date Assigned:	07/16/2014	Date of Injury:	01/29/2009
Decision Date:	09/09/2014	UR Denial Date:	05/05/2014
Priority:	Standard	Application Received:	05/19/2014

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 Preventive Medicine, has a subspecialty in Occupational Medicine and is licensed to practice in Texas. 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 injured worker is a 58 year old worker who was injured on 01/29/2009 as a result of slip and fall. The worker hit the right eyebrow and right leg against a metal. The worker complains of pain in both knees. The pain is 6/10 in severity, worse with kneeling, squatting, walking and standing, 7-8/10 pain of the shoulders, 10/10 pain in the right wrist, 8/10 pain in the left wrist, throbbing pain in the elbows, and difficulty sleeping. The physical examination is positive for decreased range of motion of the neck, together with tenderness to palpation; positive impingement tests of shoulders; tenderness to touch in the joints of the two elbows; decreased range of motion in the upper arm together with muscle spasm and tenderness. The lower back has no muscle spasms, but is tender to touch; the knee examination is notable for clicking , popping sounds, and crepitus during range of motion testing. Also, the knees were tender to touch. The ankles were tender to touch. The injured worker had MRI of the neck, lower back and Ankles. The doctor suspects internal derangement of the knees and ordered MRI of the left and right knees, but these were denied.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI Right Knee: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines Knee and Leg MRI.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints
Page(s): 335.

Decision rationale: Most cases of MRI of the knee are done if surgery is contemplated. The provider comes to such conclusion based on failed conservative care including physical therapy, and the examination findings. Therefore, we need to have information regarding worker's gait, range of motion of the knees, presence or absence of knee swelling, effusion, special tests like drawer signs, Lachman's signs, knee stability, McMurry's test. The documents lack such information; therefore, the information provided did not provide enough justification for MRI of the right knee.

MRI Left Knee: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines Knee and Leg MRI.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints
Page(s): 335.

Decision rationale: Most cases of MRI of the knee are done if surgery is contemplated. The provider comes to such conclusion based on failed conservative care including physical therapy, and the examination findings. Therefore, we need to have information regarding worker's gait, range of motion of the knees, presence or absence of knee swelling, effusion, special tests like drawer signs, Lachman's signs, knee stability, McMurry's test. The documents lack such information; therefore, the information provided did not provide enough justification for MRI of the left knee.