

Case Number:	CM14-0097246		
Date Assigned:	07/28/2014	Date of Injury:	10/03/2012
Decision Date:	09/09/2014	UR Denial Date:	05/27/2014
Priority:	Standard	Application Received:	06/25/2014

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 claimant is a 45-year-old female who sustained a vocational injury following a slip and fall on October 3, 2012. X-rays of the right knee were obtained on January 29, 2014 which showed overall osseous density to be within normal limits. Medial and lateral joint compartments were well maintained. There were no signs of fracture/dislocation. There was no calcification of soft tissue. The most recent office note available for review is from June 17, 2014 which noted the claimant had right sided knee pain and right shoulder pain. On exam, range of motion was 0 to 110 degrees. There was positive peripatellar edema and positive medial joint space tenderness. She had pain over the patella with medial and lateral compression. The claimant was noted to be 5'2" and 272 pounds and given the diagnosis of right knee internal derangement.

IMR ISSUES, DECISIONS AND RATIONALES

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

Viscosupplementation series of three injections: Upheld

Claims Administrator guideline: Decision on the Non-MTUS Official Disability Guidelines: Knee/leg Chapter (web edition).

MAXIMUS guideline: Decision on the Non-MTUS Official Disability Guidelines (ODG); Knee and Leg chapter, Hyaluronic acid injections.

Decision rationale: California MTUS and ACOEM Guidelines are silent. Subsequently, Official Disability Guidelines have been referenced. Official Disability Guidelines support viscosupplementation after claimants have failed traditional first line conservative treatment

options which should include exercise, anti-inflammatories, acetaminophen, and consideration of intraarticular cortisone injections. Criteria for hyaluronic acid injections based on Official Disability Guidelines suggest that there should be documented symptomatic severe osteoarthritis of the knee and typically should occur in claimants that are aged 50 years or older.

Documentation should also establish that there is interference with functional activities based on knee pain and there is failure of adequate response to aspiration/injection of intraarticular steroids. Guidelines also suggest that there should be abnormal physical exam objective findings as well as diagnostic imaging confirming severe end stage DJD (degenerative joint disease) with documentation supporting that it is affecting activities of daily living and quality of life.

Currently, documentation presented for review suggests the claimant has not failed an exhaustive course of traditional first line conservative treatment options with the exception that she has utilized Tramadol and ibuprofen. The most recent x-rays of the right knee available for review suggests the claimant had well maintained joint spaces with no documentation confirming osteophytes, subchondral sclerosis, joint space narrowing or end stage degenerative changes. Furthermore, based on the documentation presented for review and in accordance with Official Disability Guidelines, the request for the viscosupplementation series of three injections cannot be considered medically.