

Case Number:	CM13-0046460		
Date Assigned:	12/27/2013	Date of Injury:	09/18/2012
Decision Date:	03/19/2015	UR Denial Date:	10/29/2013
Priority:	Standard	Application Received:	11/12/2013

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: Maryland

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Neuromuscular Medicine

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 31 year old female, who sustained an industrial injury on 9/18/2012. The current diagnoses are carpal tunnel syndrome and tendinitis. Currently, the injured worker complains of continued bilateral hand pain, right greater than left. Treatment to date has included medications and physical therapy. A 10/21/13 document reveals that the patient lost her splint and needs another cock up splint. The treating physician is requesting purchase for a right cock up splint, which is now under review. The exam on 10/21/13 states that the patient has a weaker grip on right than left. There is pain in the wrist with flexion and extension. The right and left Tinel test are positive. On 10/29/2013, Utilization Review had non-certified a request for purchase for a right cock up splint. The purchase for a right cock up splint was modified to over-the-counter right cock up splint for the right wrist. The California MTUS ACOEM Medical Treatment Guidelines were cited.

IMR ISSUES, DECISIONS AND RATIONALES

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

Purchase for a right cock up splint: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 260 and 265.

Decision rationale: Purchase for a right cock up splint is not medically necessary per the MTUS Guidelines.. The MTUS ACOEM Guidelines states that when treating with a splint in carpal tunnel syndrome, scientific evidence supports the efficacy of neutral wrist splints. Splinting should be used at night, and may be used during the day, depending upon activity. The MTUS ACOEM Guidelines state that CTS (carpal tunnel syndrome) does not produce hand or wrist pain. It most often causes digital numbing or tingling primarily in the thumb, index, and long finger or numbness in the wrist. Symptoms of pain, numbness, and tingling in the hands are common in the general population, but based on studies, only about one in five symptomatic subjects would be expected to have CTS based on clinical examination and electrophysiologic testing. The documentation does not fulfill the criteria for carpal tunnel syndrome through recent physical exam or electrodiagnostic studies. The physical exam and history are not clear on the type of tendinitis this patient is said to have in the hand. The MTUS and ODG recommend neutral wrist splinting for carpal tunnel syndrome. The common term cock up splint can be misleading as this implies that the wrist be placed in extension. The documentation indicates that the patient had a prior cock up splint. There is no evidence of functional improvement from prior splint use. There is no convincing documentation of carpal tunnel syndrome. Therefore the request is not medically necessary.