

Case Number:	CM14-0169981		
Date Assigned:	10/20/2014	Date of Injury:	02/21/2013
Decision Date:	01/16/2015	UR Denial Date:	09/25/2014
Priority:	Standard	Application Received:	10/15/2014

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 New York. 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 patient is a 56-year-old female with a date of injury of February 21, 2013. The patient injured her right ankle. She also has had treatment for cervical spine pain. The patient is diagnosed with plantar fasciitis. The patient takes medication for pain. The patient continues to complain of popping sensation in the right ankle. Physical examination shows right ankle crepitus and popping. There is no documentation of instability of the ankle. There is no documentation of joint line tenderness. MRI shows possible osteochondral injury. The MRI was performed in January 2013 and also shows Achilles tendinosis. The patient has been treated with injection therapy, work modification, Cam Walker, and physical therapy without relief. At issue is whether arthroscopic surgery debridement, if and synovectomy of the right ankle with postoperative physical therapy is medically necessary.

IMR ISSUES, DECISIONS AND RATIONALES

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

Post-Operative Physical Therapy 3 times per week for 4 weeks (right ankle): Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not cite any medical evidence for its decision.

Decision rationale: Since surgery is not medically necessary, then all other associated items are not needed.

Arthroscopic Surgery, including osteochondral drilling, debridement and possible synovectomy (right ankle): 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 Official Disability Guidelines (ODG) Foot and ankle

Decision rationale: The medical records do not support the need for arthroscopic surgery including osteochondral drilling debridement a possible synovectomy of the right ankle. The patient's MRI findings do not support all of the diagnoses. In addition the physical examination does not support all the diagnoses. The patient is noted to have ongoing complaints of right ankle pain and plantar fascia pain. The physical exam reveals popping in the ankle. ODG guidelines do not support plantar fascial release unless there exception of factors present. The medical records do not document that exceptional factors are present. There is also no documentation of adequate conservative treatment for plantar fascia pain. The medical records do not support the use of degenerative ankle arthritis and there is no documentation of x-rays assessing the joint space. In addition the physical exam does not document any evidence of ligamentous instability ankle. The diagnosis is not clearly established in this case. In addition, the extent of the osteochondral lesion is not documented properly. MRI does not clearly depict the osteochondral lesion. Since the medical records do not support all the diagnoses to be dressed with multiple surgical procedures on the ankle, then the requested surgery of the ankle is not medically necessary.