

<b>Case Number:</b>	CM14-0174667		
<b>Date Assigned:</b>	10/27/2014	<b>Date of Injury:</b>	12/11/2007
<b>Decision Date:</b>	05/08/2015	<b>UR Denial Date:</b>	09/23/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/21/2014

### 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. 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: California

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

### 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 33 year old female, who sustained an industrial injury on December 11, 2007. She reported an injury to her right knee. Treatment to date has included knee arthroscopy, physical therapy, heat therapy, imaging of the right/left knees and medications. An evaluation dated May 19, 2010 revealed the injured worker had complaints of pain in both knees with more pain in the right than the left. The pain was aggravated with prolonged standing and physical work. Her pain was rated an 8 on a 10-point scale and she reported associated symptoms of tingling, weakness, grinding and swelling of the right knee.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Retrospective: Lumbar Spine Anatomical Impairment Measurements DOS: 02/16/2012:**

Upheld

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

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 2 General Approach to Initial Assessment and Documentation, Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 33 and 89.

**Decision rationale:** Regarding the request for Lumbar Spine Anatomical Impairment Measurements, Occupational Medicine Practice Guidelines state that physical examination should be part of a normal follow-up visit including examination of the musculoskeletal system. A general physical examination for a musculoskeletal complaint typically includes range of motion and strength testing. Additionally, functional assessment is part of the normal assessment performed by the treating physician. Within the documentation available for review, the requesting physician has not identified why he is incapable of performing a standard musculoskeletal examination and functional assessment for this patient, or why additional testing above and beyond what is normally required for a physical examination would be beneficial in this case. In the absence of such documentation, the currently requested Lumbar Spine Anatomical Impairment Measurements is not medically necessary.

**Retrospective: Right Knee Anatomical Impairment Measurements DOS: 02/16/2012:**  
Upheld

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

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 2 General Approach to Initial Assessment and Documentation, Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 33 and 89.

**Decision rationale:** Regarding the request for right knee Anatomical Impairment Measurements, Occupational Medicine Practice Guidelines state that physical examination should be part of a normal follow-up visit including examination of the musculoskeletal system. A general physical examination for a musculoskeletal complaint typically includes range of motion and strength testing. Additionally, functional assessment is part of the normal assessment performed by the treating physician. Within the documentation available for review, the requesting physician has not identified why he is incapable of performing a standard musculoskeletal examination and functional assessment for this patient, or why additional testing above and beyond what is normally required for a physical examination would be beneficial in this case. In the absence of such documentation, the currently requested right knee Anatomical Impairment Measurements is not medically necessary.

**Retrospective: Left Knee Anatomical Impairment Measurements DOS: 02/16/2012:**  
Upheld

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

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 2 General Approach to Initial Assessment and Documentation, Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 33 and 89.

**Decision rationale:** Regarding the request for left knee Anatomical Impairment Measurements, Occupational Medicine Practice Guidelines state that physical examination should be part of a normal follow-up visit including examination of the musculoskeletal system. A general physical examination for a musculoskeletal complaint typically includes range of motion and strength testing. Additionally, functional assessment is part of the normal assessment performed by the treating physician. Within the documentation available for review, the requesting physician has not identified why he is incapable of performing a standard musculoskeletal examination and functional assessment for this patient, or why additional testing above and beyond what is normally required for a physical examination would be beneficial in this case. In the absence of such documentation, the currently requested left knee Anatomical Impairment Measurements is not medically necessary.