

Case Number:	CM14-0186531		
Date Assigned:	11/14/2014	Date of Injury:	01/01/2006
Decision Date:	01/06/2015	UR Denial Date:	10/23/2014
Priority:	Standard	Application Received:	11/10/2014

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 hand surgeon, and is licensed to practice in Oregon. 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 57 year old female who was injured at work on November 18, 2013. Results of the injury included firmness of the bilateral palms and left ring finger pain when it sticks. Diagnosis include left trigger finger, left fourth ring finger industrial aggravation, s/p surgical release left hand ring finger, right trigger finger, right fourth digit symptomatic. Treatment modalities include tramadol, trigger finger release, occupational therapy. Progress report dated May 16, 2014 indicated the inspection showed duyputrens contracture, bilateral palms, fourth flexor tendon. Palpation showed tenderness of the bilateral palm over contracture left greater than right. No triggering in the left fourth finger but exam was positive for tenderness over the right fourth finger flexor surface. There was decreased grip strength bilaterally. Treatment included tramadol for pain, naproxen for pain, work restrictions. Left ring finger trigger release was performed on 1/14/14 and right ring finger trigger release was performed on 7/8/14. 12 sessions of OT were authorized for treatment of the trigger finger.

IMR ISSUES, DECISIONS AND RATIONALES

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

Associated surgical service: Additional postoperative occupational therapy 2x3 for the right trigger finger: Overturned

Claims Administrator guideline: Decision based on MTUS Postsurgical Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Forearm, Wrist and Hand Page(s): 22.

Decision rationale: Per the MTUS post-surgery therapy guidelines: Trigger finger (ICD9 727.03): Postsurgical treatment: 9 visits over 8 weeks, postsurgical physical medicine treatment period: 4 months the patient was certified for 12 OT visits. The request for an additional 6 visits should be certified. The MTUS allows for up to 9 visits for a trigger finger release. This patient has undergone bilateral ring finger trigger releases separated by several months. A total of 18 visits (9 per trigger release) are allowable per MTUS. The request for an additional 6 visits will bring the total to the maximum number of 18 visits allowable by the MTUS. Therefore the request is medically necessary.