

Case Number:	CM14-0187630		
Date Assigned:	11/17/2014	Date of Injury:	04/06/2006
Decision Date:	01/07/2015	UR Denial Date:	10/15/2014
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 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:

57 year old claimant with reported industrial injury of 4/6/06. End stage osteoarthritic changes is noted in the right knee. MRI of the right knee 5/31/14 demonstrates severe tricompartmental osteoarthritis with extensive loss of the menisci most likely degenerative in origin. Claimant is status post right knee arthroscopy with partial medial and lateral meniscectomy. Request is made for right total knee replacement with use of Coumadin postoperatively.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 Coagulation studies following discharge form hospital to be performed by a visiting nurse once a week for 4 weeks, related to intake of anticoagulants status post Right Total Knee Replacement, as an outpatient): Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM - <http://www.acoempracguides.org/knee>; Table 2, Summary of Recommendations ,Knee Disorders

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee and Leg, Venous Thrombosis

Decision rationale: CA MTUS/ACOEM is silent on the issue of coagulation studies. According to the ODG, knee and leg section, venous thrombosis, "Recommend identifying subjects who are at a high risk of developing venous thrombosis and providing prophylactic measures such as consideration for anticoagulation therapy". In this case the claimant is being considered for a total knee arthroplasty. As the patient will be treated with Coumadin postoperatively, the decision for coagulation studies is appropriate and medically necessary. Therefore determination is for certification.