

Case Number:	CM14-0189027		
Date Assigned:	11/19/2014	Date of Injury:	11/12/2013
Decision Date:	01/08/2015	UR Denial Date:	10/03/2014
Priority:	Standard	Application Received:	11/12/2014

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 Emergency Medicine 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:

The injured worker is a 49 year-old female, who sustained an injury on November 12, 2013. The mechanism of injury occurred when she tripped on a rug edge. Diagnostics have included: September 16, 2014 left knee MRI reported as showing a knee joint effusion and lateral collateral ligament sprain vs. partial thickness tear. Treatments have included: physical therapy, medications, and trigger point injections. The current diagnoses are: knee sprain, cervical sprain, lumbosacral sprain, cervical disc disease, headaches, and depression. The stated purpose of the request for Left knee hinged neoprene brace was not noted. The request for Left knee hinged neoprene brace was denied on October 3, 2014, citing a lack of documentation of neither medical necessity nor conservative treatment. Per the report dated September 23, 2014, the treating physician noted complaints of left knee pain.

IMR ISSUES, DECISIONS AND RATIONALES

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

Left knee hinged neoprene brace: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines - knee and leg chapter

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 346. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Knee & Leg (Acute & Chronic), Knee brace.

Decision rationale: American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004), Chapter 13, Table 13-6, page 346 note that knee braces are "Recommended: Short period of immobilization after an acute injury to relieve symptoms"; and Official Disability Guidelines(ODG), Knee & Leg (Acute & Chronic) , Knee brace note "Knee brace: Recommended as indicated below. Recommend valgus knee braces for knee OA. Knee braces that produce a valgus moment about the knee markedly reduce the net knee adduction moment and unload the medial compartment of the knee, but could be impractical for many patients. There are no high quality studies that support or refute the benefits of knee braces for patellar instability, ACL tear, or MCL instability, but in some patients a knee brace can increase confidence, which may indirectly help with the healing process. In all cases, braces need to be used in conjunction with a rehabilitation program and are necessary only if the patient is going to be stressing the knee under load." The injured worker has left knee pain. September 16, 2014 left knee MRI reported as showing a knee joint effusion and lateral collateral ligament sprain vs. partial thickness tear. The treating physician has not documented physical exam evidence of knee instability or the other criteria noted above. The criteria noted above not having been met therefore Left knee hinged neoprene brace are not medically necessary.