

Case Number:	CM14-0194256		
Date Assigned:	12/03/2014	Date of Injury:	09/27/2013
Decision Date:	01/20/2015	UR Denial Date:	10/31/2014
Priority:	Standard	Application Received:	11/20/2014

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 Physical Medicine and Rehabilitation, has a subspecialty in Interventional Spine 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 patient is a 43 year old male with an injury date of 09/27/13. Based on the 08/11/14 progress report, the patient complains of right elbow pain, right wrist pain, and left ankle pain. He has numbness in the right ring finger and right small finger. The patient also has pain in his left hip which has been caused by altered gait mechanics stemming from his left ankle injury. The 09/30/14 report indicates that the patient continues to have constant pain to his left ankle. There is tenderness to palpation on the left foot at the in joint and sinus tarsi. There is pain with foot inversion and eversion. The 10/23/14 report states that the patient has pain in his left foot. No additional positive exam findings were provided. MRI findings reveal vertical fracture of the talor body, starting proximal to the talus neck and extending plantar grade into the posterior subtalar joint (12/10/13). The 03/14/14 CT scan of the left hind foot and ankle revealed "no acute fracture or osteonecrosis diffuse soft tissue swelling medially and laterally, possibly related to ligamentous injury and this also surrounds the peroneal tendons, possibly related to peroneal tendon abnormalities." The patient's diagnoses include the following:Fracture ankleNon-union of boneThe utilization review determination being challenged is dated 10/24/14. Treatment reports were provided from 05/19/14- 10/23/14.

IMR ISSUES, DECISIONS AND RATIONALES

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

Repeat MRI of the left foot and ankle: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Minnesota Rules, Parameters for medical imaging

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Ankle & Foot (Acute & Chronic) Chapter, Magnetic resonance imaging (MRI)

Decision rationale: According to the 10/23/14 report, the patient presents with pain in his left foot and left ankle. The request is for a repeat MRI of the left foot and ankle to rule out non-union of bone and to substantiate need for subtalar joint fusion. ODG-TWC, Ankle & Foot (Acute & Chronic) Chapter, Magnetic resonance imaging (MRI) Section: "Recommended as indicated below. Indications for imaging -- MRI (magnetic resonance imaging): Chronic ankle pain, suspected osteochondral injury, plain films normalo Chronic ankle pain, suspected tendinopathy, plain films normalo Chronic ankle pain, pain of uncertain etiology, plain films normalo Repeat MRI is not routinely recommended, and should be reserved for a significant change in symptoms and/or findings suggestive of significant pathology. (Mays, 2008)" The 10/23/14 report states that the patient had "CT scan on 10/15/2013, MRI on 12/10/2013 and CT on 03/14/2014 in which an MRI was recommended by the radiologist to provide additional information." MRI findings reveal vertical fracture of the talor body, starting proximal to the talus neck and extending plantar grade into the posterior subtalar joint (12/10/13). The 03/14/14 CT scan of the left hind foot and ankle revealed "no acute fracture or osteonecrosis diffuse soft tissue swelling medially and laterally, possibly related to ligamentous injury and this also surrounds the peroneal tendons, possibly related to peroneal tendon abnormalities."