

Case Number:	CM14-0197577		
Date Assigned:	12/05/2014	Date of Injury:	08/07/2006
Decision Date:	01/23/2015	UR Denial Date:	10/31/2014
Priority:	Standard	Application Received:	11/25/2014

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 Internal Medicine, and is licensed to practice in District of Columbia. 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:

This is a 39 year old patient who sustained injury on Aug 7, 2006. He sustained injury to his left elbow, right wrist and left knee and had multiple surgical interventions as a result. He had ongoing stiffness of the right thumb proximal interphalangeal joint. He was diagnosed with osteoarthritis of the right wrist. He was prescribed tramadol and APAP, as well as a paraffin bath. On Aug 6 2014, he had MRI of the right wrist which showed moderately severe radiocarpal joint arthritis, anterior scapholunate ligament tear without tendon or retinaculum tear. The patient was noted to have improvement of symptoms with paraffin wax treatment in the office.

IMR ISSUES, DECISIONS AND RATIONALES

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

DME paraffin bath treatment: Upheld

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), pain chapter

Decision rationale: Per ODG, paraffin wax baths are recommended as an option for arthritic hands if used as an adjunct to a program of evidence-based conservative care (exercise). According to a Cochrane review, paraffin wax baths, combined with exercises can be

recommended for beneficial short term effects for arthritic hands. These conclusions are limited by methodological considerations such as the poor quality of trials. Per the clinical information provided, this therapy cannot be recommended.