

<b>Case Number:</b>	CM14-0198160		
<b>Date Assigned:</b>	12/08/2014	<b>Date of Injury:</b>	04/25/2014
<b>Decision Date:</b>	01/20/2015	<b>UR Denial Date:</b>	10/30/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	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 Podiatric surgery and is licensed to practice in New York. 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:

According to the enclosed information, the original date of injury for this patient was 4/25/2014. The patient sustained a left foot injury after a motorized wheelchair ran over his foot. Patient noted swelling, tenderness, and painful range of motion to the left foot. Patient was diagnosed with a crush injury to the left foot as well as a closed fracture to the fifth metatarsal. Patient was placed in a cam Walker with the use of an ace bandage for compression. On 10/14/2014 patient presents to his podiatrist complaining of a painful elevated fifth toe left foot. X-rays demonstrate solidly healed fracture. Physical exam reveals elevated fifth toe with tenderness upon palpation to the fifth metatarsal and fourth metatarsal phalangeal joints left side. X-rays revealed bony prominence laterally. There appears to be scar tissue around the fifth MPJ area with the inability to flex the fifth toe which is now overlapping the fourth toe. During this visit, the scar tissue around the fourth and fifth MPJ was injected with cortisone, and patient was advised to continue with aggressive physical therapy. It is mentioned in this progress note that the patient just started physical therapy. This particular progress note goes on to say that patient does not experience resolution of pain with the cortisone injection physical therapy surgical intervention would be required including exostectomy, cleaning of the fourth MTP and tendon release all left foot.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Exostectomy, left foot:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation  
<http://www.ncbi.nlm.nih.gov/pubmed/18478948>

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 374 - 375.

**Decision rationale:** After careful review of the enclosed information and the pertinent MTUS guidelines for this case, it is my feeling that the decision for exostectomy left foot is not medically reasonable or necessary for this patient at this time according to the guidelines. Chapter 14, page 374 states that surgical consultation may be indicated for patients that meets certain criteria. One of these criteria is a failure of exercise program to increase range of motion and strength of the musculature around the foot and ankle. There is no documentation enclosed in the progress notes that advises that this patient has undergone a significant and thorough physical therapy regime to his fourth and fifth MPJ. For this reason he does not meet the MTUS criteria for surgical consideration. Therefore, Exostectomy, left foot is not medically necessary.

**Cleaning of fourth MTP joint area:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 374 - 375.

**Decision rationale:** After careful review of the enclosed information and the pertinent MTUS guidelines for this case, it is my feeling that the decision for cleaning of the MTP joint area left foot is not medically reasonable or necessary for this patient at this time according to the guidelines. Chapter 14, page 374 states that surgical consultation may be indicated for patients that meets certain criteria. One of these criteria is a failure of exercise program to increase range of motion and strength of the musculature around the foot and ankle. There is no documentation enclosed in the progress notes that advises that this patient has undergone a significant and thorough physical therapy regime to his fourth and fifth MPJ. For this reason he does not meet the MTUS criteria for surgical consideration. Therefore, Cleaning of fourth MTP joint area is not medically necessary.

**Tendon release, left foot:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 374 - 375.

**Decision rationale:** After careful review of the enclosed information and the pertinent MTUS guidelines for this case, it is my feeling that the decision for tendon release left foot is not

medically reasonable or necessary for this patient at this time according to the guidelines. Chapter 14, page 374 states that surgical consultation may be indicated for patients that meets certain criteria. One of these criteria is a failure of exercise program to increase range of motion and strength of the musculature around the foot and ankle. There is no documentation enclosed in the progress notes that advises that this patient has undergone a significant and thorough physical therapy regime to his fourth and fifth MPJ. For this reason he does not meet the MTUS criteria for surgical consideration. Therefore, Tendon release, left foot is not medically necessary.