

Case Number:	CM14-0207783		
Date Assigned:	12/19/2014	Date of Injury:	07/18/1994
Decision Date:	02/13/2015	UR Denial Date:	11/26/2014
Priority:	Standard	Application Received:	12/11/2014

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 Occupational 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:

This is a 53-year-old female with a 7/18/94 date of injury. The UR decision dated 11/26/14 refers to a progress report from 11/18/14. However, this was not provided for review. According to this progress report, the patient continued to require pain management. Her primary problem was right knee pain and swelling, with left knee pain as well. Objective findings: right knee pain laterally with increased values alignment, mild effusion, and left knee lacked 10 degrees of extension and flexion to 90 degrees. Left knee x-rays revealed minimal degenerative changes of the joint with marked lateral compartment narrowing. Diagnostic impression: early OA of the right knee. Treatment to date: medication management, activity modification, and physical therapy. A UR decision dated 11/26/14 denied the request for steroid or platelet-rich plasma injection, right knee. Per the medical guidelines, PRP injections are under study for chronic refractory patellar tendinopathy and are not indicated based on this records review for this patient.

IMR ISSUES, DECISIONS AND RATIONALES

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

Steroid or Platelet Rich Plasma injection, right knee: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Knee & Leg, Platelet rich plasma (PRP)

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 Chapter - Platelet-Rich Plasma (PRP).

Decision rationale: CA MTUS does not address this issue. According to ODG, PRP is under study. One small study found a statistically significant improvement in all scores at the end of multiple platelet-rich plasma (PRP) injections in patients with chronic refractory patellar tendinopathy and a further improvement was noted at six months, after physical therapy was added. However, in the present case, there is no documentation that this patient has had a failure of conservative measures of treatment. A specific rationale identifying why this treatment modality would be required in this patient as opposed to a guideline supported treatment modality was not provided. Therefore, the request for Steroid or platelet rich plasma injection, right knee is not medically necessary.