

Case Number:	CM14-0088008		
Date Assigned:	07/23/2014	Date of Injury:	12/16/2006
Decision Date:	03/31/2015	UR Denial Date:	05/30/2014
Priority:	Standard	Application Received:	06/11/2014

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:
State(s) of Licensure: California, Indiana, New York
Certification(s)/Specialty: Internal Medicine

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 50 year old individual, who sustained an industrial injury on 12/16/2006. Per the request for authorization on 5/19/2014, the current diagnosis is right ankle lateral joint space narrowing. On the progress report dated 2/12/2014, the injured worker complained of pain in the right ankle. The treating physician is requesting MRI of the right ankle, which is now under review. On 5/30/2014, Utilization Review had non-certified a request for MRI of the right ankle. The California MTUS ACOEM Medical Treatment Guidelines were cited.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 MRI of the right ankle without contrast as outpatient: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 372.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Ankle section, MRI

Decision rationale: Pursuant to the Official Disability Guidelines, MRI right ankle without contrast is not medically necessary. MRI provides a more definitive visualization of soft tissue

structures, including ligaments, tendons, joints capsule, menisci and joint cartilage structures that x-ray or CT scan in the evaluation of traumatic with the generative injuries the majority of patients with heel pain can be treated conservatively, but cases requiring surgery MR imaging is useful. MRI reliably detect acute tears of the anterior talo-fibular ligament and calcaneal fibular ligament. Indications for MRI imaging include, but are not limited to, chronic ankle pain, suspect osteochondral injury with normal plain films; suspected tendinopathy, plain films normal; pain of uncertain etiology, plain films normal; etc. See the guidelines for additional details. In this case, the injured worker's working diagnoses are totally illegible. The documentation in the record dated May 14 2014 is handwritten and largely illegible. Utilization review was referenced for assistance in deciphering the medical record. The record appears to discuss pain in the right hip and right knee plans for an ankle x-ray and additional treatment to the knee. The medical record is otherwise difficult to interpret. The request for authorization dated May 19, 2014 reports a diagnosis of right ankle lateral joint space narrowing with the subsequent requests for MRI of the right ankle. Consequently, absent legible clinical documentation with a clear clinical indication and rationale for an MRI of the right ankle, MRI right ankle without contrast is not medically necessary.