

Case Number:	CM15-0006539		
Date Assigned:	01/23/2015	Date of Injury:	09/08/2011
Decision Date:	04/09/2015	UR Denial Date:	01/05/2015
Priority:	Standard	Application Received:	01/13/2015

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, North Carolina
 Certification(s)/Specialty: Family Practice

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 60-year-old female who sustained an industrial injury on 09/08/2011. Diagnoses include left Achilles tendinosis status post left Achilles tendon debridement which was done on 02/04/2014. Treatment to date has included medications, physical therapy, home exercise program, heat and cold packs. A physician progress note dated 12/17/2014 documents the injured worker complains of more pain recently. There is mild tenderness to palpation of the Achilles tendon. There is some calf muscle atrophy that persists. The thickening along the Achilles tendon continues to improve and is only mild today. The injured worker can dorsiflex her left ankle to 5 degrees when her knee is extended. There is pain with palpation to the sinus tarsi. Treatment requested is for MRI of Left Achilles. On 01/05/2015, Utilization Review non-certifies the request for a Magnetic Resonance Imaging of Left Achilles and cited was California Medical Treatment Utilization Schedule (MTUS) - American College of Occupational and Environmental Medicine (ACOEM).

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI of Left Achilles: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints.

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

Decision rationale: This 60-year-old woman injured her left ankle and lower leg on 09/08/2011. Specific mechanism of injury is not available in the records. She was initially treated conservatively with the diagnosis of Achilles tendinosis. She underwent an MRI of the left ankle and Achilles tendon on 03/23/2012, which revealed a partial tear of the left Achilles tendon. She underwent a surgical debridement of the left Achilles tendon on 02/04/2014. She has subsequently treated with a CAM walker and physical therapy. Her surgeon predicted her recovery to last 12-18 months post-operatively. She is currently at the 14th month. She recently complained of increased discomfort of the Achilles tendon and examination revealed tenderness to palpation of the left Achilles tendon and mild thickening of the tendon, which was felt to represent continued improvement. The patient's physician requested an MRI of the left ankle and Achilles tendon. ACOEM guidelines state that special studies are usually not needed until after a period of conservative care and observation. In this case, the patient has not reached the anticipated 18 month recovery time, thus in the absence of any "red flag issues" an MRI is not medically necessary. In addition, there are no clear objective findings on examination that suggest significant pathology to warrant an MRI in a patient who is gradually improving.