

<b>Case Number:</b>	CM15-0101913		
<b>Date Assigned:</b>	06/04/2015	<b>Date of Injury:</b>	05/04/2012
<b>Decision Date:</b>	07/13/2015	<b>UR Denial Date:</b>	04/30/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	05/27/2015

### 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  
 Certification(s)/Specialty: Emergency 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 47 year old female, who sustained an industrial injury on 5/4/12. The injured worker has complaints of intermittent to frequent flare-ups of pain about her bilateral knees, worse on the left. The documentation noted that the injured worker has complaints of periodic flare-ups of pain about her bilateral hips. The documentation noted that patellofemoral crepitus was noted about her bilateral knees and residual tenderness was noted over the bilateral trochanteric bursa and over the bilateral tensor fascial lata. The diagnoses have included bilateral knee medial meniscal tears with chondromalacia in the patella in the left knee and medial femoral condyle chondromalacia bilaterally and left knee patellar tendinitis and bilateral hip trochanteric bursitis. Treatment to date has included anaprox for inflammation and swelling; home exercise program and magnetic resonance imaging (MRI) of the bilateral knee showed medial meniscal tears with chondromalacia in the patella in the left knee and medial femoral condyle chondromalacia bilaterally. The request was for physical therapy two times four bilateral to knees and hips and anaprox 550mg #60 with 1 refill.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Physical therapy (PT) 2 times 4 (B) to knees and hips: 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) (<http://odg-twc.com/>).

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 58-59 of 127.

**Decision rationale:** The patient sustained an injury in May of 2012. She has developed ongoing pain to her knees and is diagnosed bilateral meniscal tears with chondromalacia. She has been treated with oral NSAIDs and a home exercise program. The MTUS guidelines do make recommendations with regards to physical therapy or manipulation for knee complaints. Passive manipulation for chronic knee pain is not advised. Active home exercises have been shown to have a better outcome than passive movements. As such, the request would not be medically necessary.

**Anaprox 550 mg #60 with 1 refill:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 3 Initial Approaches to Treatment Page(s): 47.

**Decision rationale:** The patient sustained an injury in May of 2012. She has developed ongoing pain to her knees and is diagnosed bilateral meniscal tears with chondromalacia. She has been treated with oral NSAIDs and a home exercise program. The ACOEM guidelines do make recommendations with regards to NSAIDs for acute and chronic pain. Studies have shown that when NSAIDs are used for more than a few weeks, they can retard or impair bone, muscle and connective tissue healing and perhaps cause hypertension. As such, they should be used only acutely. Therefore, the request is not medically necessary.