

Case Number:	CM15-0103309		
Date Assigned:	06/05/2015	Date of Injury:	06/07/2003
Decision Date:	07/07/2015	UR Denial Date:	05/08/2015
Priority:	Standard	Application Received:	05/29/2015

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: Physical Medicine & Rehabilitation

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 37 year old female with a June 7, 2003 date of injury. A progress note dated May 1, 2015 documents subjective findings (daily pain in the medial aspect of the right elbow improved following a cortisone injection; very little pain in the lateral aspect of the elbow or the wrist), objective findings (tenderness of the right medial condyle), and current diagnoses (medial epicondylitis of the right elbow with flare up; status post right elbow lateral epicondylar debridement with extensor reattachment; status post De Quervain's release of the right wrist). Treatments to date have included wrist surgery, elbow surgery, medications, and injections. The treating physician documented a plan of care that included platelet rich plasma injection to the right medial elbow.

IMR ISSUES, DECISIONS AND RATIONALES

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

Platelet Rich Plasma Injection of Right Medial Elbow: 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), Elbow, Platelet-rich plasma (PRP).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG, Elbow Chapter, Platelet-rich plasma (PRP), pages 124-125 Under study.

Decision rationale: Although MTUS is silent regarding this treatment modality, Official Disability Guidelines discusses the subject of Platelet Rich Plasma injections for diagnosis of lateral epicondylitis. The recommendation from the American Academy of Orthopaedic Surgeons is cited, with Platelet Rich Plasma injections as a possible promising treatment; however, it noted to only be reserved for the most severe and chronic cases of lateral epicondylitis as over 80% of the cases resolve spontaneously without doing anything within one year. Submitted reports have not demonstrated failed conservative treatment trials, specific deteriorating clinical findings, or limitations in ADLs to support for this injection under study. Evidence Based guidelines recommend an attempt of a local corticosteroid injection, the gold standard of treatment, to be a reasonable and usually an effective option prior to opting for PRP injection. The patient is noted to have shown improvement post cortisone injection as identified in this case. The request is not medically necessary and appropriate.