

<b>Case Number:</b>	CM15-0104241		
<b>Date Assigned:</b>	06/08/2015	<b>Date of Injury:</b>	08/14/2008
<b>Decision Date:</b>	07/14/2015	<b>UR Denial Date:</b>	05/18/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/01/2015

### 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, 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 46 year old female, who sustained an industrial injury on 08/14/2008. She reported injuring both of her ankles during a motor vehicle accident while at work. The injured worker is currently not working. The injured worker is currently diagnosed as having industrial injury to right foot/ankle with probable subtalar dislocation and post-traumatic arthritis status post-surgical treatment, acute flare of symptoms to right ankle and hind foot, and compensable consequence injuries to both knees. Treatment and diagnostics to date has included use of right foot surgeries, orthotic boot, right ankle MRI which showed partial thickness tearing of the anterior talofibular ligament and advanced osteoarthritis, and medications. In a progress note dated 04/28/2015, the injured worker presented with complaints of persistent pain in her right foot and ankle and continued pain in the knees with significant flare of symptoms in the contralateral left knee. Objective findings include well healed surgical incisions, hind foot fusion is stable, swelling and tenderness over the ankle and hind foot, and walks with a substantial limp. The treating physician reported requesting authorization for bone scan of the right ankle.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Limited Bone Scan of the Right Ankle:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines Treatment in Workers' Compensation, Online Edition Chapter: Ankle & Foot (Acute & Chronic) Bone Scan (Imaging).

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Ankle section, Bone scan.

**Decision rationale:** Pursuant to the Official Disability Guidelines, limited bone scan right ankle is not medically necessary. Both scans are not recommended except for bone infection, cancer or arthritis. Bone scans use intravenous administration of tracer medications to show radioactive uptake to detect metastases, infection, inflammatory arthropathies, significant fracture or other significant bone trauma. In this case, the injured worker's working diagnoses are industrial injury, right foot/ankle, with probable subtalar dislocation and posttraumatic arthritis, status post surgical treatment; acute flare of symptoms, right ankle and hind foot; and compensable consequences injuries both knees. A progress note dated April 28, 2015 states the injured worker had five point/ankle surgeries. There are no recent plain radiographs in the medical record. The utilization review provider initiated a peer-to-peer conference call with the treating provider. The treating provider indicated the injured worker had chronic pain and was following the recommendations of a qualified medical examination (QME). The treating provider did not make the request on his own behalf. There is no documentation of metastases, infection, inflammatory arthropathies or significant fractures or other significant bone trauma in the medical record. Consequently, absent clinical documentation with recent plain radiographs and a clinical indication and rationale for a limited bone scan, limited bone scan right ankle is not medically necessary.