

Case Number:	CM15-0107396		
Date Assigned:	06/11/2015	Date of Injury:	02/14/2012
Decision Date:	08/28/2015	UR Denial Date:	05/26/2015
Priority:	Standard	Application Received:	06/03/2015

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: Orthopedic Surgery, Hand Surgery, Sports 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:

This 41 year old female sustained an industrial injury on 2/14/12. She subsequently reported hand and finger pain. Diagnoses include tenosynovitis of the finger and trigger finger. The injured worker continues to experience pain in the bilateral hands, mainly along the right long and right ring finger. Upon examination, there is reduced range of motion in the fingers, there is tenderness is noted in the palm. On the right ring finger, there is a tender cystic mass at the digital palmar crease. A request for Excision of right long finger flexor digitorum sublimis ulnar slip for recurrent flexor tenosynovial exuberance and Excision of right ring flexor digitorum sublimis ulnar slip for recurring flexor tenosynovial exuberance was made by the treating physician.

IMR ISSUES, DECISIONS AND RATIONALES

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

Excision of right long finger flexor digitorum sublimiaa ulnar slip for recurrent flexor tenosynovial exuberance: 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), Forearm, Wrist and Hand Chapter.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 271. Decision based on Non-MTUS Citation Green's Operative Hand Surgery, 6th ed. Pages 2071-2076.

Decision rationale: This is a request for partial finger flexor tendon excision for the treatment of flexor tendon triggering. The California MTUS notes for trigger fingers, "one or 2 injections of lidocaine and corticosteroid into or near the thickened area of the flexor tendon sheath of the affected finger are almost always sufficient to cure symptoms and restore function. A procedure under local anesthesia may be necessary to permanently correct persistent triggering." The details of surgical treatment options are discussed in the specialty text referenced. Whether performed percutaneously with a needle in the office or through a small incision, the goal of the procedure is to release the origin of the flexor tendon sheath the first annular pulley. Partial tendon excision is not medically necessary or recommended.

Excision of right ring flexor digitorum sublinis ulnar slip for recurring flexor tenosynovial exuberance: 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), Forearm, Wrist and Hand Chapter.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 271. Decision based on Non-MTUS Citation Green's Operative Hand Surgery, 6th ed. Pages 2071-2076.

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