

Case Number:	CM15-0109084		
Date Assigned:	06/15/2015	Date of Injury:	06/18/2014
Decision Date:	07/17/2015	UR Denial Date:	05/07/2015
Priority:	Standard	Application Received:	06/05/2015

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: 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:

This 46 year old woman sustained an industrial injury on 6/18/2014. The mechanism of injury is not detailed. Treatment has included oral medications. Physician notes dated 4/15/2015 show increased pain to the right calf and leg. Recommendations include right knee MRI and follow up in two weeks.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI Right Knee without contrast with 3D rendering: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Meniscal injury of the knee by Bruce Anderson, MD, in UpToDate.com.

Decision rationale: This injured worker receives treatment for chronic R knee pain. This relates to an industrial injury on 6/18/2014. This review addresses a request for an MRI of the R knee. There is no locking reported. On physical exam there is no joint line tenderness medially or laterally. Patellar region exam is normal. Lachman and pivot shift testing are normal. The

ROM is from 0 to 135 degrees. The treating physician is requesting the MRI of the R knee for "R knee internal derangement, with probable meniscal tear." The management of a meniscal tear ought to include a trial of conservative treatment first. This is not documented. There is a role for a knee MRI: if symptoms and physical findings persist after a trial of treatment and knee surgery is planned. An MRI of the knee is not medically indicated at this juncture.