

<b>Case Number:</b>	CM15-0136308		
<b>Date Assigned:</b>	07/24/2015	<b>Date of Injury:</b>	03/02/2013
<b>Decision Date:</b>	08/20/2015	<b>UR Denial Date:</b>	07/01/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/14/2015

### 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: North Carolina

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:

The injured worker is a 53 year old female who sustained an industrial/work injury on 3/2/13. She reported an initial complaint of knee pain. The injured worker was diagnosed as having tear of meniscus of knee along with right distal femur fracture. Treatment to date includes medication, diagnostics, and physical therapy. MRI results were reported on 6/25/15 that demonstrate a small effusion, mild bone marrow edema in the patella and on the lateral tibial plateau, nearly resolved stress lesion in the medial tibial plateau, a partial lateral meniscectomy and subtotal medial meniscectomy but no fracture and there are degenerative changes on the knee. Currently, the injured worker complained of pain in medial aspect of knee. Per the primary physician's report (PR-2) on 6/15/15, exam noted inability for full extension of the knee, medial joint line tenderness and minimal tenderness over the medial tibial plateau. Current plan of care included diagnostic study to confirm healing of plateau fracture. The requested treatments include One (1) MRI right knee.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**One (1) MRI right knee:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Knee and Leg Chapter, MRI.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 343.

**Decision rationale:** The ACOEM chapter on knee complaint states: Most knee problems improve quickly once any red-flag issues are ruled out. For patients with significant hemarthrosis and a history of acute trauma, radiography is indicated to evaluate for fracture. Reliance only on imaging studies to evaluate the source of knee symptoms may carry a significant risk of diagnostic confusion (false-positive test results) because of the possibility of identifying a problem that was present before symptoms began, and therefore has no temporal association with the current symptoms. Even so, remember that while experienced examiners usually can diagnose an ACL tear in the non-acute stage based on history and physical examination, these injuries are commonly missed or over-diagnosed by inexperienced examiners, making MRIs valuable in such cases. Also note that MRIs are superior to arthrography for both diagnosis and safety reasons. Table 13-5 provides a general comparison of the abilities of different techniques to identify physiologic insult and define anatomic defects. Based on the physical exam findings in the provided medical records and the recommendations from table 13-5, the request for imaging of the knee is medically warranted and the request is thus medically necessary.