

Case Number:	CM15-0139106		
Date Assigned:	07/29/2015	Date of Injury:	09/20/2012
Decision Date:	08/31/2015	UR Denial Date:	06/18/2015
Priority:	Standard	Application Received:	07/17/2015

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:

The injured worker is a 56-year-old female who sustained an industrial injury on 9/20/12. She had complaints of right foot pain. Treatments include medication, elevation and physical therapy. Progress report dated 6/8/15 reports continued complaints of right foot and ankle pain. Diagnosis: synovitis. Plan of care includes: x-rays were taken and are negative for fracture, discussed the need for daily stretching exercises, continue the use of local ice massage to the affected foot daily, consider use of physical therapy if symptoms not responsive to conservative care, request authorization for cortisone injection. Follow up in 2-3 weeks.

IMR ISSUES, DECISIONS AND RATIONALES

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

Cortisone injection to right ankle: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 370.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Foot and Ankle Chapter, under Injections (Corticosteroid).

Decision rationale: The patient presents on 06/09/15 with unrated pain in the right foot and ankle. The patient's date of injury is 09/20/12. Patient has no documented surgical history directed at this complaint. The request is for CORTISONE INJECTION TO RIGHT ANKLE. The RFA was not provided. Physical examination dated 06/09/15 reveals pain upon palpation of the right foot and ankle, with swelling of the affected region noted. The patient's current medication regimen was not provided. Diagnostic imaging was not included. Patient's current work status is not provided. ODG Foot and Ankle Chapter, under Injections (Corticosteroid) have the following: "Not recommended for tendonitis or Morton's Neuroma, and not recommend intra-articular corticosteroids. Under study for heel pain. See specific indications below. Heel pain (plantar fasciitis): Under study. There is no evidence for the effectiveness of injected corticosteroid therapy for reducing plantar heel pain. Steroid injections are a popular method of treating the condition but only seem to be useful in the short term and only to a small degree...Tendon: Not recommended. Cortisone injections in the area of the Achilles tendon are controversial because cortisone injected around the tendon is harmful and can lead to Achilles tendon ruptures. Local glucocorticoid injections have generated controversy for Achilles tendinopathy. This systematic review found little evidence to support their efficacy, and, furthermore, local glucocorticoid injections were associated with rupture of the Achilles tendon... Morton's Neuroma: Not recommend corticosteroid injections. There are no RCTs to support corticosteroid injections in the treatment of Morton's Neuroma... Intra-articular corticosteroids: Not recommended. Most evidence for the efficacy of intra-articular corticosteroids is confined to the knee, with few studies considering the joints of the foot and ankle. " In regard to the request for a cortisone injection of an unspecified nature to be performed on the right ankle, the requested procedure is not supported by guidelines. It is not clear from the documentation provided whether the requested injection is to be performed for heel pain, tendon pain, Morton's neuroma, or intra-articular in nature. While such injections are currently under study for plantar fasciitis, this patient does not present with symptoms specific to that condition nor do the examination findings support such a diagnosis. Given the lack of guideline support for cortisone injections to the ankle and foot, the requested procedure cannot be substantiated. Therefore, the request IS NOT medically necessary.