

Case Number:	CM15-0141883		
Date Assigned:	07/31/2015	Date of Injury:	06/13/2014
Decision Date:	08/31/2015	UR Denial Date:	07/13/2015
Priority:	Standard	Application Received:	07/21/2015

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, Pain Management

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 40 year old man sustained an industrial injury on 6-13-2014. The mechanism of injury is not detailed. Treatment has included oral medications and surgical intervention. Physician notes dated 7-1-2015 show complaints of left knee pain, with recent low back pain and left leg pain with numbness and tingling. Recommendations include lumbar spine MRI, left knee MRI and arthrogram, and follow up in three weeks.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRA left knee: Upheld

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 343. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee & Leg, MRIs, MR Arthrography.

Decision rationale: Regarding the request for arthrogram of the knee, Occupational Medicine Practice Guidelines indicate the most knee problems improve quickly once any red flag issues

are ruled out. They go on to indicate that MRIs are superior to arthrography for both diagnosis and safety reasons period ODG states that arthrography is recommended as a postoperative option to help diagnose a suspected residual or recurrent tear. Within the documentation available for review, there is no indication that the patient has previously undergone surgical intervention for a meniscus injury. Additionally, there is no statement why an MRA would be needed in this particular case. In the absence of such documentation, the currently requested arthrogram of the knee is not medically necessary.