

Case Number:	CM15-0142618		
Date Assigned:	08/03/2015	Date of Injury:	11/23/2010
Decision Date:	09/01/2015	UR Denial Date:	06/24/2015
Priority:	Standard	Application Received:	07/22/2015

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, Indiana, New York
Certification(s)/Specialty: Internal 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 58 year old woman sustained an industrial injury on 11-23-2010. The mechanism of injury is not detailed. Evaluations include right foot x-ray dated 6-24-2015. Diagnoses include right foot pain, right second metatarsal pain, and possible neuroma. Treatment has included oral medications. Physician notes on a PR-2 dated 6-24-2015 show complaints of right foot pain. Recommendations include right foot MRI and follow up in four weeks.

IMR ISSUES, DECISIONS AND RATIONALES

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

One (1) MRI without contrast of the right foot: 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), www.odg-twc.com - Ankle and Foot Chapter.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Ankle and foot section, MRI.

Decision rationale: Pursuant to the Official Disability Guidelines, one MRI without contrast of the right foot is not medically necessary. MRI provides a more definitive visualization of soft tissue structures, including ligaments, tendons, joints capsule, menisci and joint cartilage structures that x-ray or CT scan in the evaluation of traumatic or degenerative injuries. The majority of patients with heel pain can be treated conservatively, but cases requiring surgery MR imaging is useful. MRI reliably detects acute tears of the anterior talo-fibular ligament and calcaneofibular ligament. Indications for MRI imaging include, but are not limited to, chronic ankle pain, suspect osteochondral injury with normal plain films; suspected tendinopathy, plain films normal; pain of uncertain etiology, plain films normal; etc. See the guidelines for additional details. In this case, the injured worker's working diagnoses are right foot pain; right second metatarsal pain; the possible neuroma. The date of injury is November 23, 2010. The request for authorization is June 18, 2015. According to a progress note dated June 24, 2015, the injured worker complains of right foot pain (toe pain). The injured worker is staff post surgery from 2011. The injured worker sustained a second digit fracture at the distal phalanx. Objectively, examination of the foot does not show surgical or traumatic scars, there is tenderness palpation over the second right thickened metatarsal bone area in the forefoot and midfoot area; range of motion is within normal limits; and motor examination was normal. The documentation indicates there was a fracture of the distal phalanx of the second digit. There are no palpable masses on or about the second distal digit. There is no clinical indication for an MRI of the right foot. There were no red flags present. Consequently, absent clinical documentation of a palpable mass (neuroma), radiologic abnormalities with suspected soft tissue structure injury, one MRI without contrast of the right foot is not medically necessary.