

<b>Case Number:</b>	CM15-0145229		
<b>Date Assigned:</b>	08/06/2015	<b>Date of Injury:</b>	09/26/2009
<b>Decision Date:</b>	09/02/2015	<b>UR Denial Date:</b>	07/22/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/27/2015

### 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, Oregon, Washington  
 Certification(s)/Specialty: Orthopedic Surgery

### 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 25 year old male patient who sustained an industrial injury on September 26, 2009. A recent primary treating office visit dated July 22, 2015 reported the worker remaining off from work duty temporarily totally disabled through September 04, 2015. The treating diagnoses showed post-traumatic stress disorder, and major depressive disorder, single episode, severe without psychotic features. The plan of care noted recommending psychotherapy session and psychopharmacology management; continue with around the clock home care. At a primary treating office visit dated February 20, 2015 the worker was with subjective complaint of lumbar spine pain that radiates into lower extremities. The treating diagnosis was: discogenic pain lumbar spine. Medications are: Vicodin and Prilosec.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Outpatient open reduction and internal fixation (ORIF) of the right ankle:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Ankle and Foot.

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

**Decision rationale:** CA MTUS/ACOEM is silent on the issue of open reduction and internal fixation. Per the ODG, Ankle section, open reduction and internal fixation, "Recommended as an option for fractures when radiographic evidence indicates a displaced fracture or comminuted fracture, or an open fracture with bone protrusion. Open reduction internal fixation (ORIF) is a method of surgically repairing a fractured bone, in which surgery is used to reduce or set the fracture fragments and then hardware (such as a rod, plate and/or nails) is then implanted to hold the reduction in place." In this case, the exam notes provided do not demonstrate a displaced fracture requiring open reduction and internal fixation. Therefore, the determination is for non-certification. The request is not medically necessary.

**Physical therapy to the right ankle 3 times a week for 6 weeks:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

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

**Decision rationale:** CA MTUS/ACOEM is silent on the issue of open reduction and internal fixation. Per the ODG, Ankle section, open reduction and internal fixation, "Recommended as an option for fractures when radiographic evidence indicates a displaced fracture or comminuted fracture, or an open fracture with bone protrusion. Open reduction internal fixation (ORIF) is a method of surgically repairing a fractured bone, in which surgery is used to reduce or set the fracture fragments and then hardware (such as a rod, plate and/or nails) is then implanted to hold the reduction in place." In this case, the exam notes do not demonstrate a displaced fracture requiring open reduction and internal fixation. Therefore any postoperative physical therapy is not medically necessary and the determination is for non-certification.