

Case Number:	CM15-0145321		
Date Assigned:	08/06/2015	Date of Injury:	04/26/2015
Decision Date:	09/25/2015	UR Denial Date:	06/19/2015
Priority:	Standard	Application Received:	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

Certification(s)/Specialty: Preventive Medicine, Occupational 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:

The injured worker is a 35 year old female, who sustained an industrial injury on 4-26-2015. The mechanism of injury is unknown. The injured worker was diagnosed as having right knee pain and sprain-strain. There is no record of a recent diagnostic study. Treatment to date has included therapy and medication management. In a progress note dated 6-5-2015, there were no subjective complaints or objective findings documented. There is note stating positive orthopedic tests. The treating physician is requesting right knee nerve conduction study (NCS).

IMR ISSUES, DECISIONS AND RATIONALES

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

NCS right knee: 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).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Low Back/Electrodiagnostic studies.

Decision rationale: MTUS and ODG Guidelines do not address nerve conduction studies for the knee as there is no testing that is requested or performed in that manner. Electrodiagnostic studies can be performed for an extremity or a particular nerve, but that is not how the testing was requested. In addition, Guidelines standards state that there should be supporting neurological signs and symptoms to support the medical necessity of this testing, there are no medical history or exam findings that support any electrodiagnostic testing. Under these circumstances, the NCS (general) knee is not medically necessary.