

<b>Case Number:</b>	CM15-0163305		
<b>Date Assigned:</b>	08/31/2015	<b>Date of Injury:</b>	06/08/2014
<b>Decision Date:</b>	09/30/2015	<b>UR Denial Date:</b>	08/07/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/20/2015

### 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 (IW) is a 43 year old female who sustained an industrial injury on 06/08/2014. She reported tripping and entangling her right foot with resultant right foot and right hip pain. The injured worker was diagnosed as having right ankle sprain, plantar fasciitis right foot. Treatment to date has included medications, steroid injections x2, shoe inserts and a home exercise program. Foot and ankle x-rays on the right show heel spur and no fractures. X-rays of the right hip show narrowing of the hip joint on the right and no unusual calcifications. In the Primary Treating Physician's Progress Report (PR-2) of 02/05/2015, the injured worker complains of recurrent swelling of right ankle and right hip pain. On examination the worker has decreased range of motion of the right ankle with dorsiflexion 10 of 15, internal rotation 25 of 35, and plantar flexion 45 of 50. She has anterior pain +2 swelling, and plantar fascial pain. She has positive heel pain and sensitivity. Medications include Ibuprofen, Tramadol, and Omeprazole. Pain without medications is severe. Pain with medications improves by 50% or more, and she feels her range of motion or daily activities are improved as a result of treatment. In the exam of 03/19/2015, the worker continues to have right foot and ankle pain and swelling with right hip pain. The exam shows 3+ swelling, limping, positive instability, arch tenderness and plantar pain. The treatment plan includes a MRI for instability and torn ligaments, use of shoe inserts, medications, and continue present work. A request for authorization was submitted for a MRI of the right ankle.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**MRI of the right ankle:** Overturned

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 372-374.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): Ankle/foot complaints, page 374-375.

**Decision rationale:** Guidelines state MRI of the foot and ankle provides a more definitive visualization of the soft tissue structures, including ligaments, tendons, joint capsule, menisci and joint cartilage structures, than x-ray or CT scan in the evaluation of traumatic or degenerative injuries. The majority of cases can be successfully treated conservatively, but in cases requiring surgery (eg, plantar fascia rupture in competitive athletes, deeply infiltrating plantar fibromatosis, masses causing tarsal tunnel syndrome), MR imaging is especially useful in planning surgical treatment by showing the exact location and extent of the lesion; however, the imaging study is not recommended as a screening tool, but reserved for more specific diagnoses or plan operative interventions, not presented here. Indications also require normal findings on plain films with suspected osteochondral injury, tendinopathy not identified here. The patient has some improvement with range and pain relief from medications to continue working; however, has not recovered from the conservative treatment trial. Submitted reports have adequately demonstrated clear diagnosis with correlating clinical findings of continued swelling and instability to support for the imaging study. The MRI of the right ankle is medically necessary and appropriate.