

Case Number:	CM15-0191873		
Date Assigned:	10/05/2015	Date of Injury:	01/27/2014
Decision Date:	11/19/2015	UR Denial Date:	09/24/2015
Priority:	Standard	Application Received:	09/29/2015

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: Texas, California
 Certification(s)/Specialty: Family Practice

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 33-year-old female who sustained an industrial injury on 1-27- 2014. Diagnoses have included internal derangement of the ankle, tenosynovitis of the posterior tibial tendon, ATFL impairment, peroneal tendon impairment, and peroneal and tibial nerve impairment. Documented treatment includes treatment for the right ankle including physical therapy and medication. MRIs provided were for the right foot only. On 8-20-2015, the injured worker was complaining of bilateral foot pain. The evaluation noted ankle pain at the right common peroneal and bilateral superficial peroneal nerves. The physician also noted severe right peroneal nerve pain, and left deep peroneal nerve showed mild pain. There were positive Tinel's sign on the saphenous nerves to the 1st and 2nd toes. Pain was also noted at the left and right medial and lateral plantar nerve, left posterior tibial nerve, and plantar medial nerve. The patient had muscle weakness and swelling of left ankle. The treating physician's plan of care includes a diagnostic ultrasound "to evaluate the ATFL and peroneal tendons, left and right foot." A request for authorization was submitted on 8-20-2015 for "Ultrasound of left and right foot." This was denied and the request for review states "Ultrasound L foot." Current work status is working with modified duty. The patient sustained the injury when she was on a trampoline. The patient's surgical history includes bilateral knee surgery in 2014. The patient had MRI of the right foot on 5/28/15 that revealed osseous overgrowth of 1st metatarsal head. The medication list includes Terocin patch and Tramadol. The patient had used cam walker boot unit for this injury. The patient had received an unspecified number of the PT visits for this injury.

IMR ISSUES, DECISIONS AND RATIONALES

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

Ultrasound (L Foot): Overturned

Claims Administrator guideline: Decision based on MTUS Ankle and Foot Complaints 2004.

MAXIMUS guideline: Decision based on MTUS Ankle and Foot Complaints 2004, Section(s): Special Studies. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Ankle & Foot (updated 06/22/15) Ultrasound, diagnostic.

Decision rationale: Per cited guidelines, "For patients with continued limitations of activity after four weeks of symptoms and unexplained physical findings such as effusion or localized pain, especially following exercise, imaging may be indicated to clarify the diagnosis and assist reconditioning." As per the cited guidelines, ultrasound is "Recommended as indicated in the criteria below: Indications for imaging, Ultrasound: Chronic foot pain, burning pain and paresthesias along the plantar surface of the foot and toes, suspected of having tarsal tunnel syndrome; Chronic foot pain, pain in the 3-4 web space with radiation to the toes, Morton's neuroma is clinically suspected; Chronic foot pain, young athlete presenting with localized pain at the plantar aspect of the heel, plantar fasciitis is suspected clinically." On 8-20-2015, the injured worker was complaining of bilateral foot pain. The evaluation noted pain at bilateral superficial peroneal nerves, and left deep peroneal nerve showed mild pain, positive Tinel's sign on the saphenous nerves to the 1st and 2nd toes, pain at the left and right medial and lateral plantar nerve, left posterior tibial nerve, and plantar medial nerve. The patient had muscle weakness and swelling of the left ankle. Therefore, the patient had significant objective findings and chronic left foot pain. Ultrasound of the left foot is medically appropriate and necessary to further evaluate the patient's symptoms. The request for Ultrasound (L Foot) is medically necessary and appropriate for this patient at this time.