

<b>Case Number:</b>	CM15-0192653		
<b>Date Assigned:</b>	10/06/2015	<b>Date of Injury:</b>	05/07/2014
<b>Decision Date:</b>	11/16/2015	<b>UR Denial Date:</b>	09/10/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/30/2015

### 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: Emergency 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 54 year old female, who sustained an industrial injury on 5-7-2014. The injured worker is undergoing treatment for bilateral epicondylitis greater on left and right hip trochanteric bursitis. Medical records dated 7-16-2015 indicate the injured worker complains of bilateral knee pain. The treating physician indicates, "She is doing much better with Celebrex" since changing from Relafen and Motrin. Pain level has decreased from 7 out of 10 to 5 out of 10. Physical exam dated 7-16-2015 notes no significant change and 6-17-2015 exam indicates, "Tenderness over the medial knee. She does have swelling over the left knee just below the patella. She has positive FABER's maneuver bilaterally." Treatment to date has included Relafen, Naproxen, Motrin, Celebrex, Voltaren gel and Lunesta. The original utilization review dated 9-10-2015 indicates the request for bilateral knee braces is non-certified.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Bilateral Knee Braces:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG, Knee and Leg.

**MAXIMUS guideline:** Decision based on MTUS Knee Complaints 2004, Section(s): Initial Care. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee & Leg (Acute & Chronic), Knee brace.

**Decision rationale:** The requested Bilateral Knee Braces is not medically necessary. American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004), Chapter 13, Table 13-6, page 346 note that knee braces are recommended: Short period of immobilization after an acute injury to relieve symptoms; and Official Disability Guidelines (ODG), Knee & Leg (Acute & Chronic), Knee brace note Knee brace: Recommended as indicated below: Recommend valgus knee braces for knee OA. Knee braces that produce a valgus moment about the knee markedly reduce the net knee adduction moment and unload the medial compartment of the knee, but could be impractical for many patients. There are no high quality studies that support or refute the benefits of knee braces for patellar instability, ACL tear, or MCL instability, but in some patients a knee brace can increase confidence, which may indirectly help with the healing process. In all cases, braces need to be used in conjunction with a rehabilitation program and are necessary only if the patient is going to be stressing the knee under load. The injured worker has bilateral knee pain. The treating physician indicates, "She is doing much better with Celebrex" since changing from Relafen and Motrin. Pain level has decreased from 7 out of 10 to 5 out of 10. Physical exam dated 7-16-2015 notes no significant change and 6-17-2015 exam indicates, "Tenderness over the medial knee. She does have swelling over the left knee just below the patella. She has positive FABER's maneuver bilaterally." The treating physician has not documented physical exam evidence of knee instability or the other criteria noted above. The criteria noted above not having been met, Bilateral Knee Braces is not medically necessary.