

<b>Case Number:</b>	CM15-0196363		
<b>Date Assigned:</b>	10/12/2015	<b>Date of Injury:</b>	11/26/2013
<b>Decision Date:</b>	11/19/2015	<b>UR Denial Date:</b>	09/23/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/06/2015

### 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 66 year old female who sustained an industrial injury on 11-26-13. The injured worker reported right knee discomfort. A review of the medical records indicates that the injured worker is undergoing treatments for early degenerative arthritis of medial compartment and status post right arthroscopy. Provider documentation dated 7-23-15 states the injured worker was with "some discomfort about the medial side of her knee: however, her daily activities are relatively benign." Provider documentation dated 9-3-15 noted the work status as "the patient may work with the following restrictions: No squatting, kneeling, or twisting." Treatment has included status post right knee arthroscopy with partial medial and partial lateral meniscectomies (5-15-15), physical therapy, radiographic studies, home exercise program, . Physical examination dated 9-3-15 was notable for warmth noted "about the knee", no effusion, ligaments stable, and "no patellofemoral discomfort." The original utilization review (9-23-15) denied a request for Weight bearing X-rays, left knee.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Weight bearing X-rays, left knee: Upheld**

**Claims Administrator guideline:** Decision based on MTUS Knee Complaints 2004, Section(s): Special Studies. Decision based on Non-MTUS Citation URL [www.ncbi.nlm.nih.gov/pubmed/12469580].

**MAXIMUS guideline:** Decision based on MTUS Knee Complaints 2004, Section(s): Special Studies.

**Decision rationale:** The requested Weight bearing X-rays, left knee, is not medically necessary. American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004), Chapter 13, Knee Complaints, Special Studies and Diagnostic and Treatment Considerations, pp. 341-343, recommend knee x-rays when "Patient is able to walk without a limp." Patient had a twisting injury and there is no effusion. The clinical parameters for ordering knee radiographs following trauma in this population are: Joint effusion within 24 hours of direct blow or fall; Palpable tenderness over fibular head or patella; Inability to walk (four steps) or bear weight immediately or within a week of the trauma; Inability to flex knee to 90 degrees. The injured worker is status post right knee arthroscopy with partial medial and partial lateral meniscectomies (5-15-15), physical therapy, radiographic studies, home exercise program. Physical examination dated 9-3-15 was notable for warmth noted "about the knee", no effusion, ligaments stable, and "no patellofemoral discomfort." The treating physician has not documented the presence of any of the criteria noted above. The criteria noted above not having been met, Weight bearing X-rays, left knee is not medically necessary.