

Case Number:	CM15-0203835		
Date Assigned:	10/20/2015	Date of Injury:	06/05/2013
Decision Date:	12/02/2015	UR Denial Date:	10/01/2015
Priority:	Standard	Application Received:	10/16/2015

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: Maryland

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Neuromuscular 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 29 year old male who sustained an industrial injury on 06-05-2013. Medical records indicated the worker was treated for thoracic spine sprain-strain with myalgia, right wrist sprain-strain with carpal tunnel syndrome, right knee sprain-strain, right ankle sprain-strain, stress anxiety and depression. In the provider notes of 06-26-2015, the injured worker complains of a painful right foot and ankle. His pain is described as excruciating especially with extension and flexion. There is associated heel-arch pain and numbness, tingling and burning. The worker constantly needs to massage the area for relief. He has been having pain in the forefoot area, especially between second and third toes. On exam, there is localized edema noted on the right lateral ankle. He has intact pulses and no sign of vascular compromise. He has intact motor strength in the right ankle and foot and severe hypersensitivity and palpable pain of the right plantar fascia and calcaneal body. He has a negative Tinel's sign, palpable pain throughout the foot and ankle, and an antalgic gait using a one point cane for stability. He has decreased right ankle dorsiflexion and plantar flexion by 20% and subtalar inversion and eversion decreased by 40%. His diagnoses are ankle sprain-strain, plantar fasciitis, Achilles tendonitis, Neuroma, Gait abnormality and pain. Treatment recommendation is for an Unna boot to the right ankle-foot, custom-made functional orthotics, avoid walking barefoot, continue with medications, and continue with acupuncture, chiropractic and physical therapy care. A request for authorization was submitted for: Application of Unna boot to the right ankle/foot. A utilization review decision 10-01-2015 non-certified the request.

IMR ISSUES, DECISIONS AND RATIONALES

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

Application of Unna boot to the right ankle/foot: 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: Decision based on MTUS Ankle and Foot Complaints 2004, Section(s): Activity Alteration. Decision based on Non-MTUS Citation Luz, Bruna Suelen Raymundo et al. "Evaluating the Effectiveness of the Customized Unna Boot When Treating Patients with Venous Ulcers." *Anais brasileiros de dermatologia* 88.1 (2013): 4149. PMC. Web. 30 Nov. 2015.

Decision rationale: Application of Unna boot to the right ankle/foot is not medically necessary per the MTUS Guidelines and a review of the literature. The MTUS states that putting joints at rest in a brace or splint should be for as short a time as possible. Gentle exercise at the initial phase of recovery is desirable. A review of the purpose of an Unna boot revealed that this is primarily used to treat venous ulcers in wound healing. The documentation does not reveal evidence of a venous stasis ulcer or other wound. The documentation indicates that the patient has had prior splinting of the right ankle/foot without relief. The documentation does not reveal evidence supporting the medical necessity of a right ankle/foot Unna boot. The request is not medically necessary.