

Case Number:	CM15-0020002		
Date Assigned:	02/11/2015	Date of Injury:	04/14/2010
Decision Date:	03/31/2015	UR Denial Date:	01/14/2015
Priority:	Standard	Application Received:	02/03/2015

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: New Jersey, Michigan, California
 Certification(s)/Specialty: Neurology, 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:

This 55 year old female sustained an industrial injury on 4/14/10. She subsequently reports multiple areas of back, upper extremity and lower extremity pain. Treatment to date has included physical therapy, prescription pain medications and steroid injections. The injured worker has undergone left knee surgeries. The injured worker has a recent history of falls. On 1/19/15, Utilization Review non-certified a request for MRI right ankle. The MRI right ankle request was denied based on MTUS, ACOEM and ODG guidelines.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI right ankle: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 372-373. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Ankle & Foot Procedure

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 375.

Decision rationale: According to MTUS guidelines, MRI of the ankle is recommended in case of tendinitis, neuroma and ligament tear. There is no clinical evidence to support all these diagnosis. In addition the swelling may complicate the physical examination. It is recommended to reevaluate the patient after swelling resolution. Therefore, the request of right ankle MRI is not medically necessary.