

Case Number:	CM15-0020460		
Date Assigned:	02/10/2015	Date of Injury:	04/30/2014
Decision Date:	04/01/2015	UR Denial Date:	01/19/2015
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 York, New Hampshire, Washington
 Certification(s)/Specialty: Orthopedic Surgery

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

Patient with chronic knee pain. The patient has had pain meds and physical therapy. The patient is scheduled for right knee arthroscopy and meniscectomy. MRI shows meniscal pathology. Patient has chronic pain. Request need for postop services.

IMR ISSUES, DECISIONS AND RATIONALES

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

Associated surgical service: Q-tech DVT prevention system x 21 days rental: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints.

Decision rationale: Knee scope surgery has a very low risk of dvt. The use of dvt prevention system is not needed. MTUS guidelines for dvt prevention not met. The surgery is very low risk for dvt. Not needed.

Associated surgical service: Q-tech cold therapy recovery system with wrap x 21 days rental: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 367-377.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation knee chapter | odg Knee chapter- cold therapy.

Decision rationale: ODG guidelines do not recommend 21 days of cold therapy after knee surgery. 21 days is excessive and not needed. Cold therapy is not medically necessary for 21 days after knee scope surgery.