

Case Number:	CM15-0021169		
Date Assigned:	02/10/2015	Date of Injury:	12/20/2013
Decision Date:	04/06/2015	UR Denial Date:	01/22/2015
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: California, Washington

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management

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 47-year-old female who reported an injury on 12/20/2013; the mechanism of injury is not provided for review. The patient's diagnoses include neuroma in the 3rd & 4th interspace on the right foot. The injured worker had received treatments to include injection and heel orthotics. An MRI of the right foot performed on 04/17/2014 was noted to reveal evidence of 7 mm x 2 mm region signal abnormality visualized between the third and fourth metatarsal heads that could be a possible chronic Morton's neuroma. An MRI of the right foot performed on 12/15/2014 was again noted to reveal small focus increased signal between the heads of the third and fourth metatarsal that may be a focus of scarring, fibromatosis, or less likely a Morton's neuroma. A progress note dated 01/15/2015 noted the patient returned to clinic after undergoing neuroma injection given on 10/29/2014. It was noted that this injection did not provide the patient any relief. The progress report dated 02/12/2015 noted the patient continued to have pain to the right foot rated 4/10 to 5/10 and could not bear weight without having any pain in the right foot. On physical examination, it was noted there was a palpable mass in the right third and fourth interspaces. The treatment plan included a recommendation for a neurolytic injection with Celestone.

IMR ISSUES, DECISIONS AND RATIONALES

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

Neurolytic injection with celestine times 3 for right foot: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Foot & Ankle, Alcohol injections (for Morton's neuroma).

Decision rationale: The California MTUS/ACOEM guidelines do not address neurolytic injections. However, the Official Disability Guidelines state that alcohol injections for treatment of Morton neuroma may be recommended when there has been 6 months of conservative therapy that have been attempted and have been documented and failed to include change in shoe types that are reported to result in neuroma like symptoms; change or limitation in activities that are reported to result in neuroma like symptoms; and use of metatarsal pads to reduce pressure on the nerve by spreading the metatarsal. There is lack of evidence within the documentation that the patient has attempted adequate amount of conservative therapies to include change in shoe types and the use of metatarsal pads. Additionally, it is not appropriate or recommended to perform a neurolytic injection in conjunction with a corticosteroid. Furthermore, the request is excessive as it would not allow assessment of the patient's response to the injection prior to consideration of additional injections. Moreover, it remains unclear whether the palpable mass is in fact a Morton's neuroma as the imaging provided was not conclusive. Therefore, the request for neurolytic injection with Celestine x3 for the right foot is not medically necessary.