

Case Number:	CM15-0026249		
Date Assigned:	02/18/2015	Date of Injury:	03/18/2012
Decision Date:	03/31/2015	UR Denial Date:	01/20/2015
Priority:	Standard	Application Received:	02/11/2015

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: TR, California, Virginia

Certification(s)/Specialty: Preventive Medicine, Occupational 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 27 year old female, who sustained an industrial injury on 03/18/2012. She has reported being repeatedly bit by a dog sustaining injury to the right hand and left breast. Diagnoses include right de Quervain's clinically, right carpal tunnel syndrome with positive nerve conduction velocity/electromyogram study, and status post right carpal tunnel release. Treatment to date has included physical therapy, magnetic resonance imaging of the right wrist and hand, electromyogram with nerve conduction velocity, cortisone injection, and medication regimen. In a progress note dated 12/15/2014 the treating provider reports complaints of pain to the right hand and fingers that is rated a seven to eight out of ten. The treating physician requested a five stage grip test but did not indicate the reason for the requested treatment. On 01/20/2015 Utilization Review non-certified the requested treatment of five stage grip test, noting the <http://ispub.com/IJS/5/2/5127>, Serial Grip Strength Testing.

IMR ISSUES, DECISIONS AND RATIONALES

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

5-stage grip test: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Serial Grip Strength Testing -- Its Role In

Assessment of Wrist and Hand Disability. L Ashton, S Meyers. Five Handle Position Test (5HPT)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Ashton L, Myers S. Serial grip strength testing its role in assessment of wrist and hand disability. The Internet Journal of Surgery. <http://ispub.com/IJS/5/5127> Rentzsch M, March S, Swart E. Association of hand grip strength with subjective health and work ability. Gesundheitswesen. 2015 Mar 23. Epub ahead of print. Tredgett MW, Davis TRC. Rapid repeat testing of grip strength for detection of faked hand weakness. J Hand Surg (Br) 2000 25:372.

Decision rationale: Neither the MTUS guidelines nor the Official Disability Guidelines provide details on recommendations for Five-stage grip testing. The Utilization Reviewer's prior non-certification provides a reasonable article (Serial Grip Strength Testing. Its Role in Assessment of Wrist and Hand Disability, L. Ashton, S. Myers 2003) reviewing hand grip strength testing utilized to quantify the degree of weakness and the maximal or submaximal effort of the patient in the clinic. A German publication (Association of Hand Grip Strength with Subjective Health and Work Ability, M. Rentzsch, S. March, E. Stewart 2015) discusses some preliminary data on variability of grip strength in terms of health and workability. Finally, The Journal of Hand Surgery (British and European Volume) published an article by Tredgett and Davis reporting that rapid repeated measurement of grip strength is not a reliable discriminator of true and faked hand weakness. A note in the provided records dated January 26, 2015 describes the patient as having full range of motion of the wrist with full opposability, but pain with opposition between the fourth and fifth digits. No swelling was noted, and sensation was intact. Without clear rationale and other objective exam findings concerning for grip strength along with an idea of the potential clinical benefit and possible impact on clinical management, there is not sufficient evidence in the provided records to support the medical necessity of the request.