

Case Number:	CM15-0223404		
Date Assigned:	11/19/2015	Date of Injury:	10/23/2008
Decision Date:	12/30/2015	UR Denial Date:	10/31/2015
Priority:	Standard	Application Received:	11/13/2015

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: Massachusetts

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 39-year-old female who sustained an industrial injury on 10-23-2008 and has been treated for bilateral carpal tunnel syndrome. She had carpal tunnel releases in each wrist in 2010 but is stated to have residual symptoms. On 10-14-2015, the injured worker reported frequent, severe sharp shooting bilateral wrist pain which included numbness, tingling and weakness. Symptoms were noted to be aggravated with grabbing, grasping, gripping, squeezing and pushing, and she is unable to drive or write for more than 30 minutes. Objective findings include decreased and painful right and left wrist ranges of motion, tenderness to palpation of the wrist, and Tinel's and Phalen's were noted to cause pain in both wrists. Wrists were also noted to have positive Flicjk, decreased two point-median nerve decreased sensation and positive Durkins. Documented treatment includes Tramadol, Voltaren, previous aquatic therapy stated as "the only effective therapy in the past," and use of cock-up braces at night with soft support from silicone palm pad while driving and writing. She is noted to have "worn out both sets of braces." The treating physician's plan of care includes silicon wrist pads, but this was denied on 10-31-2015.

IMR ISSUES, DECISIONS AND RATIONALES

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

Silicon wrist pads for bilateral wrists: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Treatment Index, 13th Edition (web), 2015, Carpal Tunnel Syndrome Chapter, Gel-padded glove.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Deltombe T, Theys S, Jamart J, Valet F, Kolanowski E, Hanson P. Protective effect of glove on median nerve compression in the carpal tunnel. Spinal Cord 2001 Apr; 39 (4):215-22.

Decision rationale: The claimant sustained a work injury in August 2008 and underwent bilateral carpal tunnel release surgery in 2010. When seen in October 2015 she was continuing to have frequent severe sharp shooting bilateral wrist pain with numbness, tingling, and weakness associated with movement, grabbing/grasping, gripping, squeezing, and pushing. She had worsening pain and numbness while commuting. She reported being unable to drive or write for more than 30 minutes without severe pain. She had worn wrist supports at night and a soft support with silicone palm padding when driving and writing. She had worn out both sets of braces. Physical examination findings included a body mass index of 36. There was decreased and painful wrist range of motion with tenderness and pain with Tinel's and Phalen's testing. There was a positive right Flick sign and Durkan's testing was positive bilaterally. There was decreased median nerve distribution sensation bilaterally. Authorization was requested for replacement gel wrist support pads. A gel-padded glove does not seem to have a protective effect in median nerve conduction parameters measured during and after a 30-minute carpal tunnel external compression protocol, but did result in a significant decrease in pain. In this case, the claimant has already undergone carpal tunnel release surgery. She has worn gel-padded gloves with reported benefit and the fact that they need to be replaced is consistent with continued use and efficacy. The request is considered medically necessary.