

Case Number:	CM15-0031500		
Date Assigned:	03/30/2015	Date of Injury:	10/01/2011
Decision Date:	05/01/2015	UR Denial Date:	02/10/2015
Priority:	Standard	Application Received:	02/19/2015

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

Certification(s)/Specialty: Physical Medicine & Rehabilitation

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 52 year old male, who sustained an industrial injury to the left ankle after stepping in a dirt hole while delivering a product to a customer on 10/1/11. The diagnoses have included grade II ankle sprain, neuropathic neuropathy and closed ankle fracture. Treatment to date has included medications, diagnostics, H-wave, Unna boot wrap, injection of Lidocaine for pain, brace, cane, and psychiatry. Surgery has included repair of the deltoid ligaments. Currently, as per the physician progress note dated 12/31/14, the injured worker complains of pain and swelling of the left ankle with decreased range of motion, decreased mobility of ankle and subtalar joint. The pain was rated 7-8/10 on pain scale. The injured worker walked with the assistance of a cane. The Magnetic Resonance Imaging (MRI) and x-rays of the left ankle revealed bone fragment distal tibia rule out ligament tear. Physical exam of the left ankle revealed severe edema, ligament tear, bone injury and instability. The physician noted that he is to use the cane to walk. The treatment plan was H-wave, wrapped the injured worker's foot and ankle in Unna boot and ace wrap and administered Lidocaine injection and alcohol to control the pain. The physician requested treatment includes Retrospective nerve block injection.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective nerve block injection: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Intravenous regional sympathetic blocks Page(s): 55-56.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official disability guidelines Pain (Chronic) Chapter, Injection with anesthetics and/or steroids Peripheral Nerve Blocks, Aetna Clinical Policy Bulletin: Policy Number: 0863.

Decision rationale: The patient presents with pain and swelling of the left ankle, rated 7-8/10. The request is for RETROSPECTIVE NERVE BLOCK INJECTION. There is no RFA provided and the date of injury is 10/01/11. Per 12/31/14 report, the patient has a diagnosis of grade II ankle sprain, neuropathic/neuropathy and closed ankle fracture. Physical examination to the left ankle revealed pain and swelling with decreased mobility of the ankle and subtalar joint. There is severe edema ligament tear causing instability. The patient walks with the assistance of a cane. The patient's work status is unavailable. ODG-TWC, Pain (Chronic) Chapter, Injection with anesthetics and/or steroids states: "Pain injections general: Consistent with the intent of relieving pain, improving function, decreasing medications, and encouraging return to work, repeat pain and other injections not otherwise specified in a particular section in ODG, should at a very minimum relieve pain to the extent of 50% for a sustained period, and clearly result in documented reduction in pain. Regarding Peripheral Nerve Blocks, Aetna Clinical Policy Bulletin: Policy Number: 0863 states the following: "Aetna considers the use of peripheral nerve blocks (continuous or single-injection) medically necessary for the treatment of (i) acute pain, and (ii) for chronic pain only as part of an active component of a comprehensive pain management program. Peripheral nerve blocks as sole treatment for chronic pain is considered experimental and investigational." Treater has not stated a reason for the injection. Per progress report dated 12/31/14, treater states, "I administered an injection of Lidocaine and Alcohol to help control the patient's pain." Based on ODG guidelines, the request appears to be reasonable in order to relieve pain, improve function and encourage a return to work. Aetna states, "Peripheral nerve blocks as sole treatment for chronic pain is considered experimental and investigational." However, the nerve block was not the sole treatment for the patient's chronic ankle pain. The patient was provided with H-wave, Unna boot and an ace wrap. The retrospective request for the ankle nerve block injection appears to be within guideline standards and therefore, IS medically necessary