

<b>Case Number:</b>	CM15-0036788		
<b>Date Assigned:</b>	03/05/2015	<b>Date of Injury:</b>	09/13/2014
<b>Decision Date:</b>	04/10/2015	<b>UR Denial Date:</b>	02/16/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	02/26/2015

### 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, Indiana, New York  
Certification(s)/Specialty: Internal 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 32 year old female who sustained an industrial injury on 09/13/2014. Diagnoses include left leg contusion, left-sided lumbar spine and thoracic spine sprain/strain, left hand and wrist strain, improved, bilateral knees patellofemoral pain from direct trauma, soft tissue injury to the left lower extremity and ankle with bruising and small soft tissue hematoma in this area with mild left ankle sprain, and head injury at the time of accident with occasional headaches. Treatment to date has included medications, physical therapy, whirlpool, Cam boot, and home exercise program. A physician progress note dated 01/28/2015 documents the injured worker has bruising and tenderness around the distal tibia and ankle on the left side which is improving although still remains. She ambulates with a slight limp. It was discussed with the injured worker that the soft tissue injury and hematoma may take up to a year to resolve which she understands. She has a small area of swelling and tenderness over the medial tibia consistent with soft tissue hematoma. Standing causes a lot of heaviness and pressure on her legs. Treatment requested is for a TENS Unit. On 02/16/2015 Utilization Review non-certified the request for a TENS Unit and cited was CA MTUS.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Purchase of TENS unit:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 98-99, 114-117.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines TENS Unit Page(s): 116. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain section, TENS.

**Decision rationale:** Pursuant to the Chronic Pain Medical Treatment Guidelines and the Official Disability Guidelines, TENS unit for purchase is not medically necessary. TENS is not recommended as a primary treatment modality, but a one-month home-based trial may be considered as a noninvasive conservative option, if used as an adjunct to a program of evidence-based functional restoration, including reductions in medication use. The Official Disability Guidelines enumerate the criteria for the use of TENS. The criteria include, but are not limited to, a one month trial period of the TENS trial should be documented with documentation of how often the unit was used as well as outcomes in terms of pain relief and function; there is evidence that appropriate pain modalities have been tried and failed; other ongoing pain treatment should be documented during the trial including medication usage; specific short and long-term goals should be submitted; etc. TENS to the ankle and foot is not recommended. See the guidelines for additional details. In this case, the injured worker's working diagnoses are left sided lumbar spine and thoracic spine sprain/strain; left hand and wrist strain improved; bilateral knee patellofemoral pain from direct trauma; soft tissue injury to the left lower extremity and ankle with bruising and small soft tissue hematoma with mild left ankle sprain; and have injury with occasional headaches. The documentation indicates the injured worker received extensive physical therapy, electrical stimulation, hydrotherapy and prescription medications. The discussion section contained in the January 28, 2015 progress note states that bruising and tenderness around the distal tibia and ankle on the left side is improving although still remains. The physician discusses the soft tissue injury and hematoma (around the ankle) that may take up to year to resolve. The treating physician recommends a TENS unit for use at home to help the symptoms. The treating physician also recommended compression stockings which she can wear while at work. He recommended continued physical therapy for the ankles as well as bilateral knees to reduce inflammation. The documentation appears to reflect the treating orthopedist is recommending TENS unit application to the ankle. TENS is not indicated for the ankle and foot. Additionally, there is no one month TENS trial in the medical record. Consequently, guideline recommendations state TENS unit is not indicated for treatment of the ankle and foot and there was no documentation of a one month TENS clinical trial and as a result, TENS unit for purchase is not medically necessary.