

Case Number:	CM15-0046273		
Date Assigned:	03/18/2015	Date of Injury:	09/24/2012
Decision Date:	04/23/2015	UR Denial Date:	02/19/2015
Priority:	Standard	Application Received:	03/11/2015

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: Maryland

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Neuromuscular 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 47 year old female who sustained an industrial injury on 09/24/2012. Current diagnoses include osteoarthritis and pain in joint, lower leg. Previous treatments included medication management, several surgeries, and Achilles tendon allograft extensor tendon reconstruction with tibial bone block. Diagnostic studies included x-rays of the right knee and MRI of the right knee. Report dated 01/30/2015 noted that the injured worker presented with complaints that included more clicking in her right knee, stiffness, aching and intermittent sharp pain. Pain level was rated as 7 out of 10 on the visual analog scale (VAS). Physical examination was positive for abnormal findings. The treatment plan included recommendation to begin a series of five Viscosupplemental injections to the right knee under ultrasound guidance. The physician noted that he believed cortisone injections were contraindicated for her as she does have a history of prior staph infections in the area of the anterior knee where there is Achilles allograft in place, and is also on multi-drug regimen to keep her HIV at bay.

IMR ISSUES, DECISIONS AND RATIONALES

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

Series of five viscosupplemental injections, right knee intra articularly, under ultrasound - one (1) a week for five (5) weeks: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Knee and Leg chapter, Hyaluronic acid injections.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee- Hyaluronic acid injections.

Decision rationale: Series of five viscosupplemental injections, right knee intra articularly, under ultrasound one (1) a week for five (5) weeks is not medically necessary per the ODG. The MTUS Guidelines do not address this topic. The ODG states that hyaluronic acid injections are not recommended for any other indications such as chondromalacia patellae, facet joint arthropathy, osteochondritis dissecans, or patellofemoral arthritis. Per prior peer review, a 6/27/14 progress note indicated that introducing a needle into the patient's knee would be dangerous given her history of prior staph infections in the anterior knee. Furthermore, the documentation indicates that although the patient has tricompartmental arthritis the patient's symptoms are most likely from patellofemoral arthritis for which hyaluronic acid injections are not recommended for. For all of these reasons the request for a series of five viscosupplemental injections, right knee intra articularly, under ultrasound one (1) a week for five (5) weeks is not medically necessary.