

<b>Case Number:</b>	CM15-0050748		
<b>Date Assigned:</b>	04/15/2015	<b>Date of Injury:</b>	05/16/2013
<b>Decision Date:</b>	05/14/2015	<b>UR Denial Date:</b>	03/10/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/17/2015

### 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: Emergency 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:

This 45 year old man sustained an industrial injury on 5/16/2013. The mechanism of injury is not detailed. Evaluations include right shoulder and right knee x-rays dated 2/18/2015. Diagnoses include right shoulder strain, advanced glenohumeral arthritis, right knee arthritis, cervical spine degenerative disc disease, and chronic low back pain. Treatment has included oral medications and cortisone injections. Physician notes dated 2/18/2015 show complaints of right shoulder pain rated 9/10 and described as worse than at the last visit. Recommendations include shoulder surgery, right knee surgery, orthopedic consultation, Norco, Motrin, Prilosec, and follow up in six weeks.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Consult and Follow-Up with Orthopedic Surgeon for Total Knee Replacement:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 13 Knee Complaints  
Page(s): 343.

**Decision rationale:** The MTUS guidelines related to surgical referral include several factors. Limitation of activity for more than one month and failure of exercise programs to increase range of motion and strength of leg muscles supporting the knee. There is no documentation of the patient undergoing such a program with range of motion and strength testing results. Also, there is lack of documentation supporting the injury on 5/16/2013 as being the causative agent for the patient's abnormal radiographic findings and persistent pain in the knee. The findings suggest a long-term chronic condition rather than an acute injury. Therefore, the request is not medically necessary.

**Consultation with another Orthopedic Surgeon for denied surgery:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 13 Knee Complaints  
Page(s): 343.

**Decision rationale:** The MTUS guidelines state that referral for surgical consultation is indicated for patients who have activity limitation for more than one month and failure of exercise programs to increase range of motion and strength of the musculature of the knee. There is lack of documentation as to the patient undergoing a specific knee exercise program with range of motion assessed prior to and after treatment. The patient also has already undergone multiple orthopedic consultations as listed in the records. It is unclear why further consultation is necessary other than to resubmit a request for the previously denied surgery. This is not an indication for another consultation. Therefore, the request is not medically necessary.