

<b>Case Number:</b>	CM15-0053094		
<b>Date Assigned:</b>	03/26/2015	<b>Date of Injury:</b>	05/09/2009
<b>Decision Date:</b>	05/01/2015	<b>UR Denial Date:</b>	03/11/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/20/2015

### 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: Texas, Illinois

Certification(s)/Specialty: Preventive Medicine, Occupational 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 52-year-old female, who sustained an industrial injury on 05/09/2009. The injured worker is currently diagnosed as having impingement syndrome of right shoulder, internal derangement of left knee, discogenic lumbar condition, and chronic pain syndrome. Treatment to date has included cervical spine x-rays, MR Arthrogram of the right shoulder, left knee surgery, Transcutaneous Electrical Nerve Stimulation Unit, heat/cold, and medications. In a progress note dated 01/13/2015, the injured worker presented for a follow up evaluation. The treating physician reported requesting authorization for a knee brace.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Defiance brace molded plastic, lower and upper knee addition for the left knee:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 340.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 346. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee & Leg (Acute & Chronic) Durable medical equipment (DME) DonJoy Defiance III Custom Knee Brace <http://www.betterbraces.com/donjoy-defiance-iii-custom-knee-brace>.

**Decision rationale:** The injured worker sustained a work related injury on 05/09/2009 . The medical records provided indicate the diagnosis of impingement syndrome of right shoulder, internal derangement of left knee, discogenic lumbar condition, and chronic pain syndrome. Treatments have included left knee surgery, Transcutaneous Electrical Nerve Stimulation Unit, heat/cold, and medications. The medical records provided for review do not indicate a medical necessity for Defiance brace molded plastic, lower and upper knee addition for the left knee. The records indicate the injured worker has been wearing knee brace for a while. According to the manufacturer's, "The Defiance III is the strongest knee brace offered by DonJoy and is recommended for athletes participating in high collision sports, like football, motorcross, or skiing. This brace is ideal for athletes who participate in water sports like surfing, wakeboarding, or kite surfing. People recovering from ACL and other knee ligament surgeries also use this brace on regular basis." The MTUS recommends against prolonged bracing for ACL deficient knee. The Official Disability Guidelines definition of durable medical equipment include: 1 Is primarily and customarily used to serve a medical purpose; 2. Generally is not useful to a person in the absence of illness or injury. Therefore, the requested treatment is not medically necessary because the MTUS recommends against the use of prolonged bracing for ACL deficient knee, and because defiance Knee brace is not considered a durable medical equipment.