

<b>Case Number:</b>	CM15-0058143		
<b>Date Assigned:</b>	04/02/2015	<b>Date of Injury:</b>	08/01/2013
<b>Decision Date:</b>	05/01/2015	<b>UR Denial Date:</b>	02/27/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/26/2015

### 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: Arizona, California  
 Certification(s)/Specialty: Family Practice

### 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 42 year old female who reported an industrial injury on 8/1/2013. Her diagnoses, and/or impressions, include: elbow pain; extremity pain; hand pain; lateral epicondylitis; and carpal tunnel syndrome. Current magnetic resonance imaging studies are not noted. Electromyogram and nerve conduction studies of the right upper extremities were stated to have been done on 11/14/2014. Her treatments have included physical therapy - ineffective; acupuncture therapy - ineffective; chiropractic treatments - helpful; elbow and wrist braces - helpful; steroid injection therapy to the elbow, but not wrist - helpful; ibuprofen - ineffective; modified work duties; ergonomic evaluation; and medication management. The progress notes of 2/19/2015, shows bilateral elbow, forearm, wrist and hand pain. It was noted that the neck and low back are disputed body parts, and that the ergonomic evaluation recommendations were never implemented. A recent history of a non-industrial motor vehicle accident was noted on 1/8/2015. Also noted is that Flexeril and Norco help but the side effects of a hung-over feeling and insomnia was reported. The physician's requests for treatments included right lateral epicondyle injection and right lateral elbow epicondylar brace.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Lateral Epicondyle injection Right:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 10 Elbow Disorders (Revised 2007) Page(s): 594.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 10 Elbow Disorders (Revised 2007) Page(s): 46.

**Decision rationale:** According to the ACOEM guidelines, an elbow injection is recommended for lateral epicondylagia. However, in this case, the claimant received had 2-3/10 pain with the use of topical and oral analgesics. The amount of prior injections was not known. The medication for injection, dosage, amount were not specified. The request is not substantiated and not medically necessary.

**Right elbow lateral epicondylar brace:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 10 Elbow Disorders (Revised 2007) Page(s): 596.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 10 Elbow Disorders (Revised 2007) Page(s): 41.

**Decision rationale:** According to the guidelines a brace for epicondylalgia is recommended. Studies demonstrate 12 weeks of a brace can relieve pain and improve function. The brace is recommended and is standard practice. In this case, the claimant had received the brace previously. Future length of use was not specified. As a result, the time base use was not substantiated; therefore the brace as prescribed is not medically necessary.