

| | | | |
|-----------------------|--------------|------------------------------|------------|
| Case Number: | CM15-0080877 | | |
| Date Assigned: | 05/01/2015 | Date of Injury: | 06/06/2012 |
| Decision Date: | 06/01/2015 | UR Denial Date: | 04/10/2015 |
| Priority: | Standard | Application Received: | 04/27/2015 |

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, Virginia, North Carolina
Certification(s)/Specialty: Plastic Surgery

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 55 year old male who sustained a work related injury June 6, 2012. According to an orthopedic progress note, dated March 30, 2015, the injured worker presented complaining of persistent numbness into his right hand. A nerve conduction study, dated 2/23/2015 (present in medical record) showed moderate to severe right carpal tunnel syndrome. Physical examination revealed; flexion-extension 20/20, decreased sharp-dull discrimination over the radial digits, mild thenar atrophy and positive Tinel's and Phalen's. Impression is documented as s/p 4-corner fusion 9/20/13 and right carpal tunnel syndrome. Treatment plan included request for authorization for right carpal tunnel release.

IMR ISSUES, DECISIONS AND RATIONALES

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

Right Carpal Tunnel Release to be performed as OP procedure: Overturned

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 269.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 270 and 272.

Decision rationale: The patient is a 55 year old male with signs and symptoms of right carpal tunnel syndrome that has failed conservative management of bracing, NSAIDs and activity modification and is supported by electrodiagnostic studies documenting moderate to severe carpal tunnel syndrome. In addition, the patient has evidence of a severe condition due to the presence of thenar atrophy, which is a late sign. From page 270 ACOEM, patients with the mildest symptoms display the poorest postsurgery results; patients with moderate or severe CTS have better outcomes from surgery than splinting. CTS must be proved by positive findings on clinical examination and the diagnosis should be supported by nerve-conduction tests before surgery is undertaken. From page 272, NSAIDs and splinting is recommended as first line therapy followed by a consideration for a steroid injection to facilitate the diagnosis in mild to moderate cases. Based on the examination findings and EDS, the patient has more than just a mild or moderate case of right carpal tunnel syndrome. He has failed some conservative management, but based on the overall clinical picture, a steroid injection should not be considered necessary to confirm the diagnosis. He has red flags of a serious nature. Therefore, right carpal tunnel release should be considered medically necessary. The UR review state that the patient has a mild to moderate condition, but the medical records provided for this review are more consistent with a moderate to severe condition. The above request is medically necessary.