

Case Number:	CM15-0081773		
Date Assigned:	05/04/2015	Date of Injury:	12/27/2013
Decision Date:	06/08/2015	UR Denial Date:	04/01/2015
Priority:	Standard	Application Received:	04/28/2015

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: Physical Medicine & Rehabilitation

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 48 year old female, who sustained an industrial injury on 12/27/2013. She reported a slip and fall. The injured worker was diagnosed as having left avulsion trimalleolar ankle fracture, status post open reduction and internal fixation. Treatment to date has included left ankle surgery (12/2013). Currently, the injured worker complains of severe left ankle pain. She was authorized to undergo removal of left ankle screw, scheduled for 4/09/2015. A history of cardiovascular disease was not noted. The rationale for the requested pneumatic compressor purchase for the left ankle was not noted.

IMR ISSUES, DECISIONS AND RATIONALES

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

Purchase of Pneumatic compressor for the left ankle: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Ankle and Foot (Acute and Chronic).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG guidelines: Ankle & Foot (Acute & Chronic) Chapter, Deep vein thrombosis (DVT).

Decision rationale: The patient presents with severe left ankle pain. The request is for purchase of pneumatic compressor for the left ankle. There is no RFA provided and the date of injury is 12/27/13. The patient is authorized to undergo removal of left ankle screw, scheduled for 4/09/2015. Per 03/27/15 report, physical examination of the left ankle reveals "3" oblique healed incision over the medial malleolus and 6" posterior/lateral healed incision over distal fibula to heel. There is restricted range of motion due to pain." Treatment to date has included left ankle surgery (12/2013). Current medications include Norco and Zofran. The patient is working modified duty. ODG guidelines: Ankle & Foot (Acute & Chronic) Chapter under Deep vein thrombosis (DVT): Recommend identifying subjects who are at a high risk of developing venous thrombosis and providing prophylactic measures such as consideration for anticoagulation therapy. Minor injuries in the leg are associated with greater risk of venous thrombosis. A venous thrombosis is a blood clot that forms within a vein. Deep venous thromboses (DVTs) form in the deep veins of the legs, and if a piece of a blood clot formed in a vein breaks off it can be transported to the right side of the heart, and from there into the lungs, and is called an embolism, and this process called a venothromboembolism (VTE). For patients undergoing a podiatric procedure with a history of VTE, the risk for a procedure-related VTE increases significantly and periprocedure prophylaxis is recommended. (Felcher, 2009) In this case, the request is not included in the progress reports and there is no RFA provided. The progress report dated 03/27/15 states the patient was scheduled for removal of left ankle screws on 04/09/15. There is no discussion regarding any specific risk factors for an ankle DVT and no central venous catheter was proposed in the included documentation. There is no anticipated period of immobility following hardware removal of the ankle either. The request does not appear within guidelines and is not medically necessary.