

Case Number:	CM15-0084602		
Date Assigned:	05/06/2015	Date of Injury:	08/31/1998
Decision Date:	06/05/2015	UR Denial Date:	04/16/2015
Priority:	Standard	Application Received:	05/04/2015

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: North Carolina
 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 53 year old male with an industrial injury dated 08/31/1998. His diagnoses included right knee medial patellofemoral arthrosis, post repair quadriceps left knee with acellular dermal matrix graft 07/17/2013, post left total knee arthroplasty 01/02/2013 and right shoulder partial rotator cuff tear. Prior treatment included x-rays, MRI, surgery and physical therapy. He presents on 03/20/2015 with complaints of sharp pain in bilateral knees. He stated he had authorization for surgery (right total knee arthroplasty) but was still getting medical clearance. He is complaining of increased weakness in the right knee. He also notes he fell on March 3rd and March 6th landing on the right knee. Physical exam noted range of motion 5-130 degrees. Patellar grind test was positive. There was tenderness at the medial joint line and medial/lateral facets. Current medications were Nucynta and Fentanyl patches. The physician is requesting left lower extremity vascular venous ultrasound, rule out deep vein thrombosis (DVT) and right leg venous ultrasound rule out DVT.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 Right Leg Venous Ultrasound, R/O DVT, as an outpatient: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) www.odg-twc.com: Section Knee & Leg (acute & chronic).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation up-to date, DVT.

Decision rationale: The California MTUS, ACOEM and ODG do not specifically address the requested service. The up-to date guidelines states that lower extremity doppler/ultrasound is the diagnostic tool of choice for suspected DVT. However the provided clinical documentation for review shows no physical signs suspicious for DVT much less bilateral DVT. Therefore the request is not medically necessary.

1 Left Lower Extremity Vascular Venous Ultrasound, R/O DVT as an outpatient: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) www.odg-twc.com Knee & Leg (acute & chronic).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation up-to date, DVT.

Decision rationale: The California MTUS, ACOEM and ODG do not specifically address the requested service. The up-to date guidelines states that lower extremity doppler/ultrasound is the diagnostic tool of choice for suspected DVT. However the provided clinical documentation for review shows no physical signs suspicious for DVT much less bilateral DVT. Therefore the request is not medically necessary.