

Case Number:	CM15-0096282		
Date Assigned:	05/29/2015	Date of Injury:	11/27/2013
Decision Date:	07/01/2015	UR Denial Date:	05/14/2015
Priority:	Standard	Application Received:	05/19/2015

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, Indiana, New York
Certification(s)/Specialty: Internal 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 31-year-old female, with a reported date of injury of 11/27/2013. The diagnoses include pain in joint in the lower leg. Treatments to date have included oral medication, topical pain medication, functional restoration program which was not very beneficial, and physical therapy for the left ankle. The visit note dated 04/30/2015 indicates that the injured worker presented with chronic left ankle pain. She stated that her low back and left ankle were bothering her the most. She rated her left ankle pain 8 out of 10. The injured worker attended twelve physical therapy sessions for the left ankle, and had eight sessions remaining. She stated that the sessions helped slightly with pain, and she noted an increase in her ankle strength. The objective findings include an antalgic gait, favoring the right lower extremity; no swelling or tenderness in any extremity, normal muscle strength and tone in the left lower extremity; tenderness to palpation along the lateral portion of calcaneus, inferior, and posterior to lateral malleolus of the left ankle; tenderness of the fibula-calcaneal ligaments in the left ankle; and ability to bear weight with significant pain on the left ankle. The treating physician requested an MRI of the left ankle.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI of the left ankle: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Ankle and foot section, MRI.

Decision rationale: Pursuant to the Official Disability Guidelines, MRI left ankle is not medically necessary. MRI provides a more definitive visualization of soft tissue structures, including ligaments, tendons, joints capsule, menisci and joint cartilage structures that x-ray or CT scan in the evaluation of traumatic or degenerative injuries. The majority of patients with heel pain can be treated conservatively, but cases requiring surgery MR imaging is useful. MRI reliably detects acute tears of the anterior talo-fibular ligament and calcaneofibular ligament. Indications for MRI imaging include, but are not limited to, chronic ankle pain, suspect osteochondral injury with normal plain films; suspected tendinopathy, plain films normal; pain of uncertain etiology, plain films normal; etc. See the guidelines for additional details. In this case, the injured worker's working diagnosis is pain in joints lower leg. The injured worker is status post right knee surgery September 15, 2014. The left ankle symptoms and signs are compensatory as a result of the right knee injury. According to her progress note dated April 30, 2015, the injured worker was authorized 12 sessions of physical therapy. The injured worker has eight sessions of physical therapy remaining. Physical therapy has resulted in improvement in ankle symptoms. There are no radiographs of the ankle in the medical record. Physical examination of the ankle (according to a progress note dated April 30, 2015) showed tenderness to palpation along the lateral portion of the calcaneus, inferior and posterior collateral malleolus. The fibula-calcaneal ligaments are tender. The injured worker can weight bear. The injured worker has 8 remaining sessions of physical therapy. As noted above, there are no radiographs of the left ankle. An MRI left ankle is premature at this time. There is no clinical indication/rationale in the medical record for MRI of left ankle involving a more definitive visualization of soft tissue structures. Consequently, absent clinical documentation of the remaining eight sessions of physical therapy to the ankle and radiographs of the ankle, MRI left ankle is not medically necessary.