

<b>Case Number:</b>	CM14-0128841		
<b>Date Assigned:</b>	08/20/2014	<b>Date of Injury:</b>	04/26/2013
<b>Decision Date:</b>	10/29/2014	<b>UR Denial Date:</b>	08/05/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/13/2014

### 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. The expert reviewer is Board Certified in Physical Medicine & Rehabilitation and Pain Medicine and is licensed to practice in Texas and Ohio. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

### 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 35-year-old female who reported injury on 04/26/2013. The mechanism of injury was not provided. The injured worker's diagnosis is ankle pain. The injured worker's past treatments include bracing, medication, and surgery. The injured worker's diagnostic testing was not included. The injured worker's surgical history included reconstruction of left ankle ligaments, and arthroscopic debridement on 02/26/2014. On the clinical note dated 03/25/2014, the medical records did not indicate any complaint of, or physical examination findings. The injured worker's medications include Amlodipine 5 mg daily, Ibuprofen 800 mg every 6 hours as needed, Oxycodone 5 mg one to 3 tablets every 3 hours as needed. The request was for MRI of the left foot/ankle without dye. The rationale for the request was not provided. The Request for Authorization form was submitted on 07/24/2014.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**MRI of left foot/ankle w/o dye:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG (Official Disability Guidelines): Indications for Imaging-MRI; Ankle and Foot

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 372-374..

**Decision rationale:** The request for MRI of the left foot/ankle without dye is not medically necessary. The injured worker is status post reconstruction of ankle ligaments and arthroscopic debridement on the left. The California MTUS/ACOEM Guidelines state for most patient's presenting with true foot and ankle disorders, special studies are usually not needed until after a period of conservative care and observation. Most ankle and foot problems improve quickly once any red flag issues are ruled out. Routine testing and special imaging studies are not recommended during the first month of activity limitation, except when a red flag noted on history or examination raises suspicion of a dangerous foot or ankle condition of her foot pain. Patient's who have suffered ankle injuries caused by a mechanism that could result in fracture can have radiographs if the Ottawa criteria are met. This will markedly increase the diagnostic yield for plain radiography. The Ottawa criteria are rules for foot and ankle radiograph fixed series. An ankle radiographic series is indicated if the patient is experiencing any pain in the lateral malleolar area, and any of the following findings apply: tenderness of the posterior edge or tip of the lateral malleolus, tenderness of the posterior edge or tip of the medial malleolus, inability to bear weight both immediately and in the emergency department. In the mid foot area, any of the following findings apply: tenderness at the base of the fifth metatarsal, tenderness at the navicular bone, or inability to bear weight both immediately and in the emergency department. Radiographic evaluation may also be performed if there is: rapid onset of swelling and bruising, if the patient's age exceeds 55 years, if the injury is high velocity, in the case of multiple injury or obvious dislocation/subluxation, or if the patient cannot bear weight for more than 4 steps. The medical records lack indication of the significant change in symptoms or findings which indicate significant pathology. There is a lack of documentation of significant findings of neurologic deficit upon physical examination. As such, the request for MRI of the left foot/ankle without dye is not medically necessary