

Case Number:	CM14-0134561		
Date Assigned:	08/27/2014	Date of Injury:	03/06/2010
Decision Date:	09/29/2014	UR Denial Date:	07/28/2014
Priority:	Standard	Application Received:	08/20/2014

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 and Rehabilitation, has a subspecialty in Pain Medicine and is licensed to practice in California and Virginia. 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 patient is a 38 year old female who sustained an industrial injury on 3/06/2010. She underwent right knee arthroscopy in 2010 and lateral release on 5/21/2013. Conservative care has included medications, acupuncture and physical therapy. A prior peer review dated 7/28/2014 non-certified the request for 6 bilateral Synvisc injections. The current medical literature does not support Synvisc for treatment of chondromalacia and there is no physical findings or diagnostic studies to indicate knee OA. The most recent progress report and PR-2 provided for review, is dated 11/13/2013, which indicates the patient has complaints of bilateral knee pain. She had a recent bout of right knee pain, primarily anteriorly. Objectively, she has pain with patellar compression, is stable to varus/valgus stress, stable to anterior/posterior stress, and she has slight medial joint line tenderness. The primary diagnosis is chondromalacia patella. She was administered an injection to the right knee of marcaine, lidocaine and kenalog. Plan of treatment includes conservative management with right knee injection, PT, medications, and potentially Synvisc injections.

IMR ISSUES, DECISIONS AND RATIONALES

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

Bilateral knee Synvisc Injections- six injections: 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) Knee Chapter.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee, Synvisc (hylan); Hyaluronic acid injections.

Decision rationale: According to the Official Disability Guidelines, hyaluronic acid injections may be recommended as a possible option for severe osteoarthritis for patients who have not responded adequately to recommended conservative treatments (exercise, NSAIDs or acetaminophen), to potentially delay total knee replacement. This patient has chondromalacia patella. The medical records do not establish this patient has severe OA of the bilateral knees and is otherwise a surgical candidate of knee arthroplasty. In the absence of significant OA, the medical records do not establish this patient is an appropriate candidate for Synvisc injections. In accordance with the guidelines, the medical necessity of the request is not established. The request is not medically necessary.