

Case Number:	CM14-0147574		
Date Assigned:	09/15/2014	Date of Injury:	02/02/2012
Decision Date:	10/15/2014	UR Denial Date:	08/12/2014
Priority:	Standard	Application Received:	09/11/2014

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 and is licensed to practice in Texas. 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:

Medical records reflect the claimant is a 55 year old male who sustained a work injury on 2-2-12. The claimant was approved for lumbar surgery. It was noted the claimant had risk factors for DVT to include age 55 and BMI of 30.2. On 6-10-14, the claimant underwent microlumbar decompression. He reported 20% improvement with the procedure. The claimant is being treated with medications.

IMR ISSUES, DECISIONS AND RATIONALES

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

Segmental pneumatic appliance 1 day rental per report dated 6/10/14 QTY: 1.00: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG - TWC Knee and Leg Procedure Summary last updated 06/05/2014; Evidence citations for segmental pneumatic appliance and sleeves

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee and leg chapter - Compression garments

Decision rationale: ODG notes that good evidence for the use of compression is available, but little is known about dosimetry in compression, for how long and at what level compression

should be applied. Low levels of compression 10-30 mmHg applied by stockings are effective in the management of telangiectases after sclerotherapy, varicose veins in pregnancy, the prevention of edema and deep vein thrombosis (DVT). High levels of compression produced by bandaging and strong compression stockings (30-40 mmHg) are effective at healing leg ulcers and preventing progression of post-thrombotic syndrome as well as in the management of lymphedema. DVT prophylaxis is generally indicated for knee and leg surgeries. There is an absence in documentation per current treatment guidelines to support compression garments due to lumbar surgery. There is also an absence in documentation noting that this claimant has a past history of DVT. Therefore, the medical necessity of this request is not established.

Segmental pneumatic sleeves purchase QTY: 2, per report dated 6/10/14 QTY: 2.00:

Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG - TWC Knee and Leg Procedure Summary last updated 06/05/2014; Evidence citations for segmental pneumatic appliance and sleeves

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee and leg chapter - Compression garments

Decision rationale: ODG notes that good evidence for the use of compression is available, but little is known about dosimetry in compression, for how long and at what level compression should be applied. Low levels of compression 10-30 mmHg applied by stockings are effective in the management of telangiectases after sclerotherapy, varicose veins in pregnancy, the prevention of edema and deep vein thrombosis (DVT). High levels of compression produced by bandaging and strong compression stockings (30-40 mmHg) are effective at healing leg ulcers and preventing progression of post-thrombotic syndrome as well as in the management of lymphedema. DVT prophylaxis is generally indicated for knee and leg surgeries. There is an absence in documentation per current treatment guidelines to support compression garments due to lumbar surgery. There is also an absence in documentation noting that this claimant has a past history of DVT. Therefore, the medical necessity of this request is not established.