

<b>Case Number:</b>	CM14-0149045		
<b>Date Assigned:</b>	09/18/2014	<b>Date of Injury:</b>	01/10/2008
<b>Decision Date:</b>	10/17/2014	<b>UR Denial Date:</b>	09/09/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/13/2014

### 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 Occupational Medicine, and is licensed to practice in California. 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:

This is a 58-year-old female with a 1/10/08 date of injury. The mechanism of injury involved falling on her right knee while chasing after a child. An orthopedic progress note dated 2/8/13 stated that the patient had a right knee arthroscopy meniscectomy in 2008 and was doing fine until she experienced a sudden onset of right knee stiffness and pain in 11/2012. The patient subsequently received a series of 3 viscosupplementation injections in the right knee in 1/2013 and was ambulatory with crutches on that orthopedic visit. Exam findings of the right knee revealed a mild effusion and a limited range of motion. The patient's diagnoses included mild to moderate right knee arthritis, history of a microfracture of the lateral tibial plateau and torn lateral meniscus, and traumatic chondromalacia (tibial plateau and patellofemoral joint). The patient's current medication list was not included in the documentation. In regards to the patient's right knee pain, the documentation noted that on 2/7/13, the patient had to "hobble" to work. An orthopedic progress note dated 3/14/13 stated that the right knee pain was better, however, another orthopedic progress note dated 4/18/13 stated that the patient was complaining of right knee pain. Treatment to date: viscosupplementation injections, electrical stimulation, heel slides, knee support, medications, physical therapy, home exercise program, right knee arthroscopy (8/13/08). An adverse determination was received on 9/9/14 due to the lack of documentation of the longevity of the relief obtained from the previous knee viscosupplementation. ODG states that a repeat viscosupplementation is indicated if there was at least a 6 month positive response from a prior injection.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Orthovisc Injection, Once a Week for 3 Weeks, Right Knee: Upheld**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines

**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

**Decision rationale:** The California MTUS does not address the request for an Orthovisc injection of knee. The Official Disability Guidelines indications include patients who experience significantly symptomatic osteoarthritis but have not responded adequately to standard nonpharmacologic and pharmacologic treatments; are not candidates for total knee replacement; younger patients wanting to delay total knee replacement. If relief is obtained for 6-9 months and symptoms recur, it may be reasonable to do another series. This patient suffered a right knee injury in 1/2008 and underwent a right knee arthroscopy meniscectomy in 8/2008. The patient began experiencing right knee pain in 2012 and subsequently received a series of three viscosupplementation injections in the right knee in 1/2013. There was a lack of documentation as to how long the relief from the right knee pain lasted after these viscosupplementation injections. Furthermore, the documentation noted that the patient had to "hobble" to work on 2/7/13, and was complaining of right knee pain on 4/18/13 at an orthopedic follow-up visit. There was a lack of evidence (i.e. subjective and physical exam findings) supporting a prolonged relief, of at least 6 months, from the prior viscosupplementation injections. Therefore, the request is not medically necessary.