

<b>Case Number:</b>	CM14-0179559		
<b>Date Assigned:</b>	11/04/2014	<b>Date of Injury:</b>	09/03/2014
<b>Decision Date:</b>	12/09/2014	<b>UR Denial Date:</b>	10/17/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/29/2014

### 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 Orthopedic Surgery 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 35 year old male injured worker with a 9/3/14 date of injury. He was riding a bike as part of work, hit a speed bump, and flew over the handlebars. He has a history of previous right clavicle surgery in which hardware was placed. In a 10/1/14 evaluation, the patient complained of pain and numbness in his right arm and hand. Objective findings included a well-healed clavicle incision, prominence over the lateral clavicle at the acromioclavicular (AC) joint with instability, full passive shoulder motion, no rotational lag sign, and negative impingement signs. X-rays of the right shoulder revealed a well-placed midshaft clavicular plate, a healed fracture of the clavicle, and a type 3 AC joint separation. Diagnostic impression: right shoulder AC joint separation-grade 3. Treatment to date includes a sling and activity modification. A UR decision on 10/17/14 denied the request for fixation of the right AC joint, remove hardware, to replace with new, because there has not been 3 months of conservative care and there is no evidence of marked functional difficulty or marked deformity.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Fixation of the right Acromioclavicular joint - Remove hardware, to replace with new:**  
Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints Page(s): 214.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints  
Page(s): 211-212. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG):  
Shoulder Chapter--Hardware implant removal

**Decision rationale:** The California MTUS states that patients with AC joint separation may be treated conservatively. The expected period of pain is three weeks, with the pain gradually decreasing. If pain persists after recovery and return to activities, resection of the outer clavicle may be indicated after six months to one year, although local cortisone injections can be tried. However, in this case the patient has a type 3 AC joint separation which has excellent functional results if treated non-operatively. In addition, the new AC joint injury is unrelated to the previous right clavicle fracture, which has healed, and can be treated and considered separately. The California MTUS does not address the issue of hardware removal. Official Disability Guidelines does not recommend the routine removal of hardware implanted for fracture fixation, except with broken hardware or persistent pain, after ruling out other causes of pain such as infection and nonunion. However, there is no evidence that the currently implanted hardware is broken or is compromised as a result of the new AC joint injury. Therefore, the request for fixation of the right acromioclavicular joint - remove hardware, to replace with new, is not medically necessary.