

<b>Case Number:</b>	CM14-0183400		
<b>Date Assigned:</b>	11/10/2014	<b>Date of Injury:</b>	09/05/2012
<b>Decision Date:</b>	12/17/2014	<b>UR Denial Date:</b>	10/15/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/04/2014

### 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 Internal Medicine, has a subspecialty in Nephrology 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:

The patient is a 27-year-old female who has submitted a claim for plantar fibromatosis associated with an industrial injury date of 9/5/2012. Medical records from 3/25/2014 up to 11/4/2014 were reviewed showing continued right ankle pain aggravated by walking and grinding. Pain is temporarily relieved with acupuncture. As per progress report dated 11/4/2014, patient will undergo her last extracorporeal shock wave therapy. She stated that the therapy caused an increase in pain after the initial treatment but since then is experiencing some improvement. Right ankle examination revealed decreased ROM with tenderness over posterior to lateral malleolus. There is mild diffuse swelling over the anterolateral ankle joint. The patient also has tight calves bilaterally. Toe-walk and heel walk are painful. MRI of the right ankle taken on 12/9/2013 showed no abnormalities. Treatment to date has included shockwave therapy, calf and lower leg stretches, Norco, Diclofenac, and acupuncture. The utilization review from 10/15/2014 denied the request for HGH and/or low energy extracorporeal shockwave treatment x3-right foot. The reason for denial was not made available.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**HGH and/or low energy extracorporeal shockwave treatment x3-right foot:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Ankle, Extracorporeal shock wave therapy (ESWT)

**Decision rationale:** The CA MTUS does not specifically address this topic. Per the Strength of Evidence hierarchy established by the California Department of Industrial Relations, Division of Workers Compensation, the Official Disability Guidelines (ODG) was used instead. Extracorporeal shock wave therapy (ESWT) is recommended in patients whose heel pain from plantar fasciitis has remained despite 6 months of standard treatment; at least 3 consecutive treatments have been performed prior to use of ESWT (rest, ice, NSAIDs, orthotics, physical therapy, cortisone injections).; contraindicated in: Pregnant women; Patients younger than 18 years of age; Patients with blood clotting diseases, infections, tumors, cervical compression, arthritis of the spine or arm, or nerve; patients who had physical or occupational therapy within the past 4 weeks, patients with bilateral pain; maximum of 3 therapy session over 3 weeks. Not recommended using high energy ESWT. Recommended using low energy ESWT as an option for chronic plantar fasciitis, where the latest studies show better outcomes without the need for anesthesia. In this case, as per progress note dated 11/4/2014, patient will undergo her last extracorporeal shock wave therapy. She stated that the therapy caused an increase in pain after the initial treatment but since then is experiencing some improvement. However, date of initial treatment and number of completed treatments were not made available for review. In addition, there was no documentation of compelling subjective and objective improvement with therapy. Therefore the request for HGH and/or low energy extracorporeal shockwave treatment x3 for the right foot is not medically necessary.