

Case Number:	CM14-0185326		
Date Assigned:	11/13/2014	Date of Injury:	06/02/2012
Decision Date:	12/19/2014	UR Denial Date:	10/09/2014
Priority:	Standard	Application Received:	11/06/2014

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 Family 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 61 year old male patient who sustained a work related injury on 6/2/12. Patient sustained the injury when the left front tire of the truck rolled over the right foot. The current diagnosis includes sprain of the right foot and ankle. Per the doctor's note dated 9/16/14, patient has complaints of pain in the right ankle and foot. Physical examination of the right ankle and foot revealed limited ROM and strength. The current medication lists includes Naproxen. The patient has had MRI of the right foot and right ankle in 2013; X-rays of the right ankle dated 09/05/12, that was normal. Diagnostic imaging reports were not specified in the records provided. Any surgical or procedure note related to this injury were not specified in the records provided. He has had a urine drug toxicology report on 9/12/14. The patient has received an unspecified number of the physical therapy, acupuncture and chiropractic visits for this injury. The patient has used elastic sleeve, cast shoe and two crutches, and TENS unit for this injury.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI of the right foot and right ankle: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines, Ankle & Foot

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 372-373. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG, Ankle & Foot (updated 10/29/14).

Decision rationale: Per cited guidelines, "For most cases presenting with true foot and ankle disorders, special studies are usually not needed until after a period of conservative care and observation. Most ankle and foot problems improve quickly once any red-flag issues are ruled out. Routine testing, i.e., laboratory tests, plain-film radiographs of the foot or ankle, and special imaging studies are not recommended during the first month of activity limitation, except when a red flag noted on history or examination raises suspicion of a dangerous foot or ankle condition or of referred pain. For patients with continued limitations of activity after four weeks of symptoms and unexplained physical findings such as effusion or localized pain, especially following exercise, imaging may be indicated to clarify the diagnosis and assist reconditioning. Stress fractures may have a benign appearance, but point tenderness over the bone is indicative of the diagnosis and a radiograph or a bone scan may be ordered. Disorders of soft tissue (such as tendinitis, metatarsalgia, fasciitis, and neuroma) yield negative radiographs and do not warrant other studies, e.g., magnetic resonance imaging (MRI)." Per ODG ankle and foot guidelines cited below." Repeat MRI is not routinely recommended, and should be reserved for a significant change in symptoms and/or findings suggestive of significant pathology." The patient has had MRI of the right foot and right ankle in 2013. Any significant changes in objective physical examination findings since the last MRI that would require a repeat MRI study were not specified in the records provided. Any finding indicating red flag pathologies were not specified in the records provided. Patient has received an unspecified number of PT visits for this injury. Details of these conservative treatments and response of physical therapy were not specified in the records provided. Detailed response to oral pharmacotherapy was not specified in the records provided. A recent right ankle X-ray report was not specified in the records provided. A plan for an invasive procedure of the right ankle was not specified in the records provided. The medical necessity of the request for MRI of the right foot and right ankle is not fully established in this patient.