

Case Number:	CM14-0027185		
Date Assigned:	06/13/2014	Date of Injury:	09/15/2009
Decision Date:	09/05/2014	UR Denial Date:	02/13/2014
Priority:	Standard	Application Received:	03/03/2014

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:

The claimant is a 67-year-old who was injured in work related accident on September 15, 2009. Records indicate an injury to the right shoulder. Recent report of January 6, 2014 described continued complaints of pain about the shoulder for which the claimant carried a diagnosis of adhesive capsulitis, rotator cuff syndrome, and rotator cuff tear. Formal documentation of imaging was not available for review. Orthopedic assessment showed positive Neer, Hawkins, and empty can testing with restricted range of motion at endpoints and 4+/5 strength. It indicates that based on failed conservative measures, surgical arthroscopy to the shoulder was recommended for further intervention. Specific documentation of conservative measures have included medication management, therapy, and activity restrictions.

IMR ISSUES, DECISIONS AND RATIONALES

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

Right shoulder arthroscopy: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints Page(s): 210-211.

Decision rationale: According to the Shoulder Complaints Chapter of the ACOEM Practice Guidelines, surgical arthroscopy to the shoulder would not be indicated. These guidelines state

that surgery for impingement syndrome is usually arthroscopic decompression. This procedure is not indicated for patients with mild symptoms or those who have no activity limitations. Conservative care, including cortisone injections, can be carried out for at least three to six months before considering surgery. This individual is with no indication of imaging to formally demonstrate rotator cuff pathology. There is no current documentation of conservative measures including prior injection therapy. Without documentation of the above or indication of recent imaging for review, the acute need of an arthroscopy for this individual's shoulder would not be supported. The request for a right shoulder arthroscopy is not medically necessary or appropriate.

Pre-operative medical clearance: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM OMPG (Second Edition, 2004), Chapter 7 Independent Medical Examinations and Consultations, page 127.

Decision rationale: Since the primary procedure is not medically necessary, none of the associated services are medically necessary.

Twelve sessions of post-operative physical therapy to the right shoulder: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM.

MAXIMUS guideline: Decision based on MTUS Postsurgical Treatment Guidelines.

Decision rationale: Since the primary procedure is not medically necessary, none of the associated services are medically necessary.