

Case Number:	CM14-0211025		
Date Assigned:	12/23/2014	Date of Injury:	08/20/2013
Decision Date:	02/20/2015	UR Denial Date:	12/15/2014
Priority:	Standard	Application Received:	12/16/2014

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: California

Certification(s)/Specialty: Orthopedic Surgery

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 54 year old female with an 8/20/13 injury date. In a 12/4/14 note, the patient complained that the symptoms are not getting any better. There was continued pain with range of motion, right wrist weakness, and triggering. Objective findings included positive Finkelstein's test, tenderness over the 1st dorsal compartment, locking with thumb range of motion, catching, and decreased overall range of motion. Diagnostic impression: R wrist DeQuervain's, R thumb triggering. Treatment to date: rest, NSAIDS, injection, splints. A UR decision on 12/15/14 denied the request for DeQuervain's release and trigger thumb release as an outpatient because there was no documentation that indicated if either condition was treated with injections in the past.

IMR ISSUES, DECISIONS AND RATIONALES

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

Dequervains release and trigger thumb release as an outpatient: Overturned

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints, Chronic Pain Treatment Guidelines Trigger Finger Release. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) - Treatment in Workers' Compensation (TWC), Official Disability Guidelines (ODG), Treatment, Integrated Treatment / Disability Duration Guidelines, Forearm, Wrist, & Hand (Acute & Chronic)

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 259, 271. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Forearm, Wrist, and Hand Chapter--DeQuervain's Tenosynovitis, Trigger Finger Release

Decision rationale: CA MTUS states that the majority of patients with De Quervain's syndrome will have resolution of symptoms with conservative treatment. Official Disability Guidelines (ODG) states that surgery for DeQuervain's tenosynovitis is recommended as an option if there are consistent symptoms, signs, and failed three months of conservative care. CA MTUS states that one or two injections of lidocaine and corticosteroids into or near the thickened area of the flexor tendon sheath of the affected finger are almost always sufficient to cure symptoms and restore function. A procedure under local anesthesia may be necessary to permanently correct persistent triggering. In addition, ODG criteria for trigger finger release include subjective/objective findings consistent with trigger finger/thumb despite one or two injections of lidocaine and corticosteroids into or near the thickened area of the flexor tendon sheath of the affected finger. Although the clinical notes were handwritten and difficult to read, it is clear that the patient has continued symptoms of both right wrist DeQuervain's and right thumb triggering that have not responded to injections, non-steroidal anti-inflammatory drugs (NSAIDs), rest, and splinting. Given that the patient has attempted a satisfactory conservative treatment regimen, and the generally positive results in the literature of the requested procedures, it would be appropriate at this time for the patient to proceed with a right wrist DeQuervain's release and right thumb trigger finger release. Therefore, this request is medically necessary.