

Case Number:	CM15-0111994		
Date Assigned:	06/18/2015	Date of Injury:	12/22/2010
Decision Date:	07/24/2015	UR Denial Date:	05/26/2015
Priority:	Standard	Application Received:	06/09/2015

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: Texas, California
 Certification(s)/Specialty: Family Practice

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 52 year old female patient who sustained an industrial injury on 12/22/2010. She sustained the injury due to continuous trauma. The diagnoses include bilateral carpal tunnel syndrome left more than right, bilateral De Quervain syndrome and bilateral epicondylitis, improved. Per the doctor's note dated 6/15/2015, she had complaints of bilateral wrists pain. The physical examination revealed right wrist/hand- atrophy of thenar musculature; left wrist/hand- 1 cm atrophy of the left forearm, atrophy of thenar musculature; positive Tinel's and Phalen's test bilaterally and 4+/5 strength bilaterally, decreased sensation in thumb and index finger. Per the doctor's note dated 5/8/15, she had bilateral wrist pain with tingling and numbness. The physical examination revealed tenderness over the bilateral wrists, positive Tinel's, Finkelstein's and Phalen's test bilaterally. Per the doctor's note dated April 28, 2015 she had increasing bilateral wrist and hand pain, improved right elbow pain after an injection, difficulty sleeping, anxiety and depression. The pain was rated a seven out of ten on the visual analogue scale. The objective finding noted that the physical examination was unchanged from the prior visit. Per the orthopedic consultation dated 12/08/2014, she had high blood pressure, chronic pain, anxiety, stress and depression. The medications list include Lidoderm patch, Triamterene/ HCTZ, Norvasc, Synthroid, naproxen, Trazadone and Celexa. She has had electrodiagnostic nerve conduction study on 05/14/2014, which revealed evidence of moderate to severe bilateral left greater, median entrapment neuropathy across the wrists. Treatment to date has included medications, radiological studies, electrodiagnostic studies, injections, physical therapy, acupuncture treatments, wrist splints, biofeedback sessions and a home exercise program.

IMR ISSUES, DECISIONS AND RATIONALES

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

Bilateral wrist braces: Overturned

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 264.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 264.

Decision rationale: Q-- Bilateral wrist braces-Per he ACOEM guidelines "Initial treatment of CTS should include night splints. Day splints can be considered for patient comfort as needed to reduce pain, along with work modifications."Per he ACOEM guidelines "Any splinting or limitations placed on hand, wrist, and forearm activity should not interfere with total body activity in a major way. Strict elevation can be done for a short period of time at regular intervals."Patient has bilateral wrist pain with numbness. She has significant objective findings on physical examination right wrist/hand- atrophy of thenar musculature; left wrist/hand- 1 cm atrophy of the left forearm, atrophy of thenar musculature; positive Tinel's and Phalen's test bilaterally and 4+/5 strength bilaterally, decreased sensation in thumb and index finger. She has EMG/NCS report with abnormal findings. Wrist brace is medically appropriate for this patient to provide rest/stabilization while working and to avoid re-injury. The request of bilateral wrist braces is medically appropriate and necessary for this patient.