

|                       |              |                              |            |
|-----------------------|--------------|------------------------------|------------|
| <b>Case Number:</b>   | CM15-0112542 |                              |            |
| <b>Date Assigned:</b> | 06/19/2015   | <b>Date of Injury:</b>       | 01/19/2015 |
| <b>Decision Date:</b> | 07/17/2015   | <b>UR Denial Date:</b>       | 06/04/2015 |
| <b>Priority:</b>      | Standard     | <b>Application Received:</b> | 06/11/2015 |

### 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: Maryland, Virginia, North Carolina  
Certification(s)/Specialty: Plastic 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:

The injured worker is a 39 year old male who sustained an industrial injury on 01/19/2015 while pulling a heavy laundry basket with 2 fingers. The injured worker was diagnosed with contusion and fracture of the 4th finger, right hand. The injured worker underwent a closed reduction and pin fixation for the proximal interphalangeal (PIP), right ring finger fracture on January 27, 2015. Treatment to date has included diagnostic testing, surgery, conservative measures, physical therapy with 18 authorized sessions and 16/18 completed as of May 18, 2015, home exercise program and medications. According to the primary treating physician's progress report on May 27, 2015, the injured worker continues to experience stiffness of the finger tip. Examination of the right 4th finger demonstrated tenderness to palpation over the distal tip with compression. Range of motion was limited at the distal tip with motor and sensory intact. Current medications were not documented. Treatment plan consists of continuing with home exercise program and stretching exercises and the current request for additional physical therapy right 4th finger twice weekly for 3 weeks.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Continued Physical Therapy, Right 4th finger, 2 times wkly for 3 wks, 6 sessions:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Postsurgical Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Postsurgical Treatment Guidelines Page(s): 12 and 20.

**Decision rationale:** The patient is a 39 year old male who had undergone closed reduction and pin fixation of a right ring finger fracture dislocation of the PIP joint on January 27th, 2015. The patient had been authorized for 18 physical therapy visits in total. From the last visit evaluations, it is unclear if the patient had completed all 18 visits and if the patient was still making progress with formal physical therapy. Specific improvement in ROM values had not been documented. Based on this, further physical therapy should not be considered medically necessary. The patient may need further treatment including possible surgical intervention; however, further formal physical therapy is not indicated at this time without further justification. From the above guidelines on page 12: "In cases where no functional improvement is demonstrated, postsurgical treatment shall be discontinued at any time during the postsurgical physical medicine period." From page 20: Fracture of one or more phalanges of hand (fingers) (ICD9 816): Postsurgical treatment: Complicated, 16 visits over 10 weeks; postsurgical physical medicine treatment period: 4 months. Therefore, as the patient has exceeded the number of visits and treatment period and has not been documented to show specific functional gains, further physical therapy is not medically necessary.