

<b>Case Number:</b>	CM15-0122954		
<b>Date Assigned:</b>	07/07/2015	<b>Date of Injury:</b>	05/31/2014
<b>Decision Date:</b>	08/05/2015	<b>UR Denial Date:</b>	06/16/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/25/2015

### 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: 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:

The injured worker is a 48-year-old female who sustained an industrial injury on 05/31/2014. Diagnoses include status post right knee arthroscopy, debridement of meniscal tear and recurrent right knee meniscal tear per MRI scan 8/6/14. Treatment to date has included medications, right knee arthroscopy 12/5/14 and physical therapy (PT). According to the progress notes dated 1/19/15, the injured worker reported right knee pain rated 1/10, which was improved with postoperative PT; she had attended six sessions thus far with increased range of motion and decreased pain. On examination, range of motion was 130 degrees flexion and 0 degrees extension, which was improved from the previous visit. She was neurologically intact distally with continued decreased quadriceps strength at 4/5. Progress notes dated 5/29/15 noted the injured worker's right knee pain to be 9/10, constant and worsening. The examination was unchanged. A request was made for physical therapy for the right knee, twice weekly for six weeks due to persistent pain, decreased function and weakness.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Physical Therapy, right knee (2 times a week for 6 weeks): Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Physical Medicine.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Physical Medicine Page(s): 98-99.

**Decision rationale:** According to the MTUS guidelines, passive therapy can provide short-term relief during the early phases of pain treatment and are directed at controlling symptoms such as pain, inflammation and swelling and to improve the rate of healing soft tissue injuries. They can be used sparingly with active therapies to help control swelling, pain and inflammation during the rehabilitation process. Active therapy is based on the philosophy that therapeutic exercise and/or activity are beneficial for restoring flexibility, strength, endurance, function, range of motion, and can alleviate discomfort. The MTUS guidelines also state that patients are instructed and expected to continue active therapies at home as an extension of the treatment process in order to maintain improvement levels. The MTUS guidelines recommend up to 10 sessions of therapy for Myalgia, myositis, neuralgia, neuritis, and radiculitis. The medical records support a course of physical therapy treatments. However, the request for 12 sessions exceeds the amount recommended by the MTUS guidelines and the medical records note that Utilization Review has allowed for modification to allow 10 sessions. The request for physical therapy, right knee (2 times a week for 6 weeks) is therefore not medically necessary and appropriate.