

<b>Case Number:</b>	CM15-0175478		
<b>Date Assigned:</b>	09/17/2015	<b>Date of Injury:</b>	12/20/2013
<b>Decision Date:</b>	10/19/2015	<b>UR Denial Date:</b>	08/05/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/05/2015

### 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, Oregon, Washington  
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:

The injured worker is a 28 year old female, who sustained an industrial injury on December 20, 2013. The initial symptoms reported by the injured worker are unknown. The injured worker was currently diagnosed as having shoulder impingement. On July 24, 2015, the injured worker complained of left anterior shoulder pain. The pain is present in certain positions and movements. She reported doing well on the day of the exam. Her range of motion was noted to be almost 100%. The injured worker was noted to fail a long course of "conservative management." The treatment plan included platelet rich plasma and an autologous conditioned plasma kit series. On August 5, 2015, utilization review denied a request for platelet rich plasma and autologous conditioned plasma kit series.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Platelet rich plasma:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Shoulder, Platelet-rich plasma (PRP).

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) shoulder section, Platelet rich plasma (PRP).

**Decision rationale:** CA MTUS/ACOEM is silent on the issue of platelet rich plasma (PRP). According to ODG shoulder section, Platelet rich plasma (PRP), "Under study as a solo treatment. PRP looks promising, but it may not be ready for prime time as a solo treatment. PRP has become popular among professional athletes because it promises to enhance performance, but there is no science behind it yet. In a blinded, prospective, randomized trial of PRP vs placebo in patients undergoing surgery to repair a torn rotator cuff, there was no difference in pain relief or in function." As the guidelines do not specifically recommend shoulder PRP, the determination is for non-certification. Therefore, the request is not medically necessary.

**Autologous conditioned plasma kit series:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Shoulder, Autologous blood injection.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) shoulder section, Platelet rich plasma (PRP).

**Decision rationale:** CA MTUS/ACOEM is silent on the issue of platelet rich plasma (PRP). According to ODG shoulder section, Platelet rich plasma (PRP), "Under study as a solo treatment. PRP looks promising, but it may not be ready for prime time as a solo treatment. PRP has become popular among professional athletes because it promises to enhance performance, but there is no science behind it yet. In a blinded, prospective, randomized trial of PRP vs placebo in patients undergoing surgery to repair a torn rotator cuff, there was no difference in pain relief or in function." As the guidelines do not specifically recommend shoulder PRP, the determination is for non-certification. Therefore, the request is not medically necessary.