

<b>Case Number:</b>	CM15-0048953		
<b>Date Assigned:</b>	03/20/2015	<b>Date of Injury:</b>	10/05/2007
<b>Decision Date:</b>	06/02/2015	<b>UR Denial Date:</b>	03/10/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/16/2015

### 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, New York, California

Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

### 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 applicant is a represented 59-year-old who has filed a claim for chronic knee and leg pain reportedly associated with an industrial injury of October 5, 2007. In a Utilization Review report dated March 10, 2015, the claims administrator failed to approve a request for a knee x-ray series. The claims administrator referenced an order form dated March 2, 2015, a progress note dated February 3, 2015, and a RFA form dated March 3, 2015. The applicant's attorney subsequently appealed. On March 9, 2015, the applicant reported ongoing complaints of low back pain, knee pain, leg pain, and fibromyalgia. The applicant was not working, it was acknowledged. Norco, Prozac, Prilosec, and Robaxin were prescribed and/or continued while the applicant was seemingly kept off of work. The applicant was severely obese, with BMI of 45. Motor strength was intact. Swelling and tenderness about the right knee was evident. On February 3, 2015, the applicant reported ongoing complaints of low back, knee, and leg pain, highly variable, 3-8/10. Norco, Prilosec, and Cymbalta were endorsed. The applicant was, once again, described as not working following imposition of permanent work restrictions. The applicant had undergone a left knee total knee arthroplasty. The applicant had issues with severe right knee arthritis, it was acknowledged, as well as significant anxiety and depression. The applicant was asked to consider SI joint injection therapy. The note was quite difficult to follow and mingled historical issues with current issues. The applicant was receiving Social Security Disability Insurance (SSDI) benefits in addition to Workers Compensation indemnity benefits, it was acknowledged. The applicant's BMI was 42, it was reported. Urine drug testing was endorsed. The note did not explicitly detail the need for knee x-ray imaging.

## IMR ISSUES, DECISIONS AND RATIONALES

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

**SERIES OF X-RAYS, RIGHT KNEE, PER 03/02/15 ORDER:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 13 Knee Complaints.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 347.

**Decision rationale:** No, the request for a series of right knee x-rays was not medically necessary, medically appropriate, or indicated here. As noted in the MTUS Guideline in ACOEM Chapter 13, Table 13-6, page 347, the routine usage of radiographic film for most knee injuries or complaints is deemed "not recommended." Here, moreover, the attending provider's documentation and progress notes of February 3, 2015 and March 10, 2015, in addition to being quite difficult to follow, did not set forth a clear or compelling basis for the request. The applicant was described on February 3, 2015 as carrying a known diagnosis of severe right knee arthritis. It was not clearly stated or clearly established how knee x-rays would advance or alter the treatment. It was not clearly stated, for instance, that the applicant was intent on pursuing any kind of surgical remedy involving the knee based on the outcome of the study in question. The attending provider's progress notes and documentations made no mention of the need for knee x-ray imaging. Therefore, the request was not medically necessary.