

Case Number:	CM15-0071465		
Date Assigned:	04/21/2015	Date of Injury:	06/03/2014
Decision Date:	05/20/2015	UR Denial Date:	03/19/2015
Priority:	Standard	Application Received:	04/14/2015

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:

This 29 year old man sustained an industrial injury on 6/3/2014. The mechanism of injury is not detailed. Evaluations include x-rays of the hand that are undated. Diagnoses include interphalangeal dislocation of the hand. Treatment has included oral and topical medications and splinting. Physician notes dated 3/3/2015 show complaints of frequent dislocating of the interphalangeal joint when removing the splint. The worker is unable to perform activities of daily living because of this. Recommendations include surgical intervention.

IMR ISSUES, DECISIONS AND RATIONALES

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

Surgery for contractures of proximal interphalangeal joint, right little finger: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Forearm, Wrist and Hand Chapter.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 270. Decision based on Non-MTUS Citation Book Chapter Dislocations and Ligament Injuries in the Digits Greg Merrell and Joseph F. Slade Green's Operative Hand Surgery, chapter 9, 291-332.

Decision rationale: The patient is a 29 year old male with a well-documented severe left small finger PIP flexion deformity that is painful with grasping and gripping. He is documented to have failed conservative management including physical therapy. This would not likely improve with further physical therapy and it is noted to be affecting function due to the pain. Surgical release could be expected to provide the only likely benefit. From page 270, ACOEM, Chapter 11, Referral for hand surgery consultation may be indicated for patients who:-Have red flags of a serious nature-Fail to respond to conservative management, including worksite modifications-Have clear clinical and special study evidence of a lesion that has been shown to benefit, in both the short and long term, from surgical intervention. In addition, from the above reference, 'The three requirements for successful treatment of a flexion contracture are a non-arthritic joint, a functional extensor mechanism, and a motivated and compliant patient. In that setting, release of the contracture, even if mild (<20 degrees), is quite reliable.' The previous MRI noted no evidence of osteoarthritis and noted a normal extensor tendon. The patient was noted to have completed previous physical therapy and therefore should be considered a compliant patient. Based on these recommendations and that this patient's flexion deformity following previous trauma is a well-recognized complication that has failed appropriate conservative management including physical therapy, surgical intervention should be considered medically necessary. The UR reviewer stated guidelines from ODG, for Dupuytren's contracture which would not be fully relevant to this patient.