

<b>Case Number:</b>	CM15-0096085		
<b>Date Assigned:</b>	05/26/2015	<b>Date of Injury:</b>	10/02/2001
<b>Decision Date:</b>	06/26/2015	<b>UR Denial Date:</b>	04/27/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	05/19/2015

### 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: Emergency 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 injured worker is a 52 year old female who reported an industrial injury on 10/2/2001. Her diagnoses, and/or impressions, are noted to include: derangement of the ankle/foot joint; anomalous muscle tendon fascia; antalgic gait; and tarsal tunnel syndrome of the right foot with neuritis of the posterior tibial nerve, status-post tarsal tunnel of the right ankle with decompression of the posterior tibial nerve and application of splint for non-weight bearing (11/14/14). No imaging studies of the right ankle are noted. Her treatments have included right foot/ankle surgeries (2011, 2012 & 11/14/2014), physical therapy; medication management; and modified work duties. The progress notes of 3/9/2015 reported new, very severe pain, a ripping sensation across her plantar foot but originating at the area of her previous surgery, with a request for authorization for plantar fascial release. The progress notes of 4/20/2015 report sporadic, severe, sharp pain in the right ankle that wraps around the heel. The objective findings were noted to include the denial for the plantar fascial release. The physician's requests for treatments were noted to include magnetic resonance imaging studies of the right ankle to evaluate the Achilles.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**MRI (right ankle): Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 374. Decision based on Non-MTUS Citation Official Disability Guidelines, Foot and Ankle, MRI.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 375.

**Decision rationale:** The requested MRI (right ankle), is not medically necessary. American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004), Chapter 14, Ankle & Foot Complaints, Special Studies and Diagnostic and Therapeutic Considerations, recommend imaging studies with documented red flag conditions after failed conservative treatment trials. The injured worker has new, very severe pain, a ripping sensation across her plantar foot but originating at the area of her previous surgery, with a request for authorization for plantar fascial release. The progress notes of 4/20/2015 report sporadic, severe, sharp pain in the right ankle that wraps around the heel. The objective findings were noted to include the denial for the plantar fascial release. An August 8, 2014 right ankle MRI was reported as showing peroneus longus and brevis post-surgical changes and tendinosis with calcaneal degenerative changes. The treating physician has not documented an acute clinical change since the date of this previous imaging study. The criteria noted above not having been met, MRI (right ankle) is not medically necessary.