

Case Number:	CM15-0099018		
Date Assigned:	06/01/2015	Date of Injury:	11/05/2013
Decision Date:	07/07/2015	UR Denial Date:	05/13/2015
Priority:	Standard	Application Received:	05/22/2015

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, Indiana, Oregon
 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 43 year old male, who sustained an industrial injury on November 5, 2013 while working as a repair technician. The injured workers injury occurred when he squatted down and felt a pop in his right knee. The diagnoses have included sprain/strain of the right knee and leg, right knee plica syndrome and chronic right knee pain. Treatment to date has included medications, radiological studies, MRI, physical therapy, cortisone injections and a home exercise program. Current documentation dated April 24, 2015 notes that the injured worker reported ongoing right anterior knee pain particularly with squatting. The injured worker also noted occasional catching and locking in the knee. Examination of the right knee revealed slight tenderness along the superior and medial aspect of the patella. There was also pain noted with squatting. A McMurray's test was negative. The treating physician's plan of care included a request for a right knee scope, excision of plica and pre-operative labs.

IMR ISSUES, DECISIONS AND RATIONALES

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

Right knee scope excision of plica: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation National Institutes of Health.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints
Page(s): s 343-345.

Decision rationale: CA MTUS Chapter 13, Knee Complaints, pages 343-345, states that surgical intervention can be considered for knee complaints when there is failure of activity modifications and clear imaging evidence for ligament tears or meniscus tears as well as other pathologies. In this case there is no evidence of an edematous plica or corresponding condylar lesion on the MRI of 12/6/13 to warrant resection of a plica in the knee. Therefore the request is not medically necessary.

Pre-Op Labs: CBC, CMP, UA, PTT, PT, and EKG: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints
Page(s): s 343-345.

Decision rationale: Since the primary procedure is not medically necessary, none of the associated services are medically necessary.