

Case Number:	CM14-0144933		
Date Assigned:	09/12/2014	Date of Injury:	12/23/2011
Decision Date:	10/22/2014	UR Denial Date:	08/19/2014
Priority:	Standard	Application Received:	09/08/2014

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. The expert reviewer is Board Certified in Family Medicine and is licensed to practice in California. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

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 55 year old male whose date of injury is 12/23/2011. Treatment to date includes analgesic medications and one prior alcohol sclerosing injection to the foot. Two additional injections were authorized on 08/18/14. Re-examination dated 05/07/14 indicates that the injured worker complains of right foot pain. On physical examination there is pain with palpation of scar tissue on the right foot. X-rays are negative.

IMR ISSUES, DECISIONS AND RATIONALES

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

Series of six alcohol Sclerosing injections to the right foot: 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), Ankle and Foot Chapter, Alcohol Injections

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) ODG Ankle and Foot Chapter, Alcohol injections (for Morton's neuroma)

Decision rationale: Based on the clinical information provided, the request for series of six alcohol sclerosing injections to the right foot is not recommended as medically necessary. There is insufficient clinical information provided to support this request. The injured worker was

authorized to undergo 2 alcohol sclerosing injections in August; however, there is no information provided regarding the performance of these injections or the injured worker's response. Therefore, medical necessity is not established in accordance with the Official Disability Guidelines.