

Case Number:	CM14-0155443		
Date Assigned:	09/25/2014	Date of Injury:	02/17/2004
Decision Date:	11/03/2014	UR Denial Date:	09/02/2014
Priority:	Standard	Application Received:	09/23/2014

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 Internal Medicine, Pulmonary Diseases, and is licensed to practice in California, Florida, and New York . 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 62-year-old male who reported an injury on 02/17/2004. The mechanism of injury occurred while dropping a weight on his foot. His diagnosis include a left knee medial joint pain. The injured worker's past treatment included surgery, injections, and medications. His diagnostic exams included x-rays of the bilateral knees and an MRI of the left knee. The injured worker's surgical history included a right knee arthroscopy performed on 08/2008. On 08/19/2014, the injured worker complained of a significant amount of lateral knee pain which caused difficulty climbing stairs and arising from a squatting position. The physical exam revealed that the left knee had effusion and medial joint symptoms. The exam also revealed a pronated right forefoot, weakness of his posterior tibial tendon and hallux valgus with local tenderness noted. The injured worker's medications were not clearly indicated in the clinical notes. The treatment plan consisted of a repeat left knee platelet rich plasma injection to avoid surgery. A request was received for a left knee platelet rich plasma injection. The rationale for the request was that the injured worker received adequate pain relief from the initial left knee plasma rich platelet injection performed in 07/2014. The Request for Authorization Form was signed and submitted on 08/19/2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Left Knee PRP Injection: Upheld

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee & Leg, Platelet-rich plasma

Decision rationale: The request for a left knee platelet rich plasma injection is not medically necessary. The Official Disability Guidelines state that the use of platelet rich plasma injections is still under study and that there is still a need for further basic scientific investigations and controlled trials to identify the benefits, side effects, and adverse effects that may be associated with the use of platelet rich plasma injections for muscular and tendinous injuries. The results of platelet rich plasma injections are promising but still inconsistent and therefore, their use is not recommended. Based on the clinical notes, the injured worker still had complaints of left knee pain, difficulty climbing stairs, and arising from a squatting position. On examination, the patient's left knee had an effusion and medial joint symptoms. The clinical notes also indicated that the injured worker had a previous platelet rich plasma injection of the left knee which provided significant pain and discomfort relief. However, the guidelines do not support the use of platelet rich plasma injections, as there are inconclusive studies that indicate benefits, side effects, and adverse effects that may be associated with the use of these injections. Therefore, due to lack of support for the use of platelet rich plasma injections, the request is not supported. Thus, the request for a Left Knee Platelet Rich Plasma Injection is not medically necessary.