

Case Number:	CM13-0017397		
Date Assigned:	10/11/2013	Date of Injury:	08/22/2011
Decision Date:	01/06/2014	UR Denial Date:	07/23/2013
Priority:	Standard	Application Received:	08/28/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Orthopedic Surgery and is licensed to practice in New Hampshire, New York, Washington. 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 physician 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.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

Male patient who was injured at work in 2011. Has chronic back pain. MRI shows multiple levels of lumbar degeneration to include L3-4 and L4-5 and L5-S1. He has had chiropractic manipulation, epidurals and PT without relief. EMG shows mild L5 radiculopathy. Question the need for lumbar discogram procedure. The discogram is a provocative test done only when the surgeon is considering fusion. It has not been supported in the recent peer review literature as being a reliable way to evaluate a patient preoperatively and its effectiveness has been seriously questioned. At issue in this case is whether the test and following CT is medically needed.

IMR ISSUES, DECISIONS AND RATIONALES

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

Lumbar discogram at the L3-4 and L4-5 levels with a control level at L2-3 with post CT injection: Upheld

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 309.

Decision rationale: Discogram workup of patients who have multiple levels of lumbar degeneration and back pain is not medically necessary and not supported by the current peer-review spine literature.(see above refs). Discography is a test to determine what levels may be causing back pain when the treating surgeon is considering doing fusion surgery. Fusion surgery

is clearly not medically needed, in this case of a patient who has a work injury and back pain with MRI evidence of multiple levels of degeneration. This patient has no clinical indicators for fusion. There is no instability, tumor, or fracture present in the spine. There is also no evidence of stenosis. Spinal surgery and therefore discography is not medically needed in this case, Discography is not supported in the peer review literature. MTUS guidelines indicate that discography is not appropriate in patients who are not candidates for surgical fusion. Since this patient has multiple levels of lumbar disc degeneration, the patient is not a surgical candidate.