

Case Number:	CM13-0019855		
Date Assigned:	10/11/2013	Date of Injury:	02/13/2012
Decision Date:	01/13/2014	UR Denial Date:	08/14/2013
Priority:	Standard	Application Received:	09/04/2013

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 physical medicine and rehabilitation, has a subspecialty in interventional spinal 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 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:

The patient is a 51-year-old with a date of injury on 2/13/12. The progress report dated 7/17/13 by [REDACTED] noted that the patient was status post cervical fusion at C5-C7 in 2006 and C4-5 in 2012. The patient reports having continual pain since the second surgery. His pain is primarily on his left side with pain radiating down his left upper extremity. He also reports bilateral cervical and shoulder pain. It was noted that the patient had failed conservative treatment in the past. The patient's diagnoses include: cervical radicular syndrome; cervical syndrome; post laminectomy syndrome, cervical; spondylosis without myelopathy. A request was made for bilateral medial branch blocks at C4, C5, C6, and C7.

IMR ISSUES, DECISIONS AND RATIONALES

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

Cervical medial branch nerve blocks at bilateral C4, C5, C6 & C7 under fluoroscopy.:
Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Neck and Upper Back Chapter..

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Facet Joint Diagnostic Blocks (Cervical) Chapter..

Decision rationale: The progress report dated 7/17/13 by [REDACTED] noted that the patient was status post cervical fusion at C5-C7 in 2006 and C4-5 in 2012. The patient reports having continual pain since the second surgery. His pain is primarily on his left side with pain radiating down his left upper extremity. He also reports bilateral cervical and shoulder pain. It was noted that the patient had failed conservative treatment in the past. The patient's diagnoses include: cervical radicular syndrome; cervical syndrome; post laminectomy syndrome, cervical; spondylosis without myelopathy. A request was made for bilateral medial branch blocks at C4, C5, C6, and C7. The ODG guidelines regarding criteria for the use of diagnostic blocks for facet nerve pain states that diagnostic facet blocks should not be performed in patients who have had a previous fusion procedure at the planned injection level. The patient has had fusion of C5-C7. The requested DMB blocks at C4,5,6 and 7 would cover C4-5 and C6-7 facet joints. These levels have been surgically fused and ODG guidelines do not support facet joint evaluations at the fused levels. The request for cervical medial branch nerve blocks at bilateral C4, C5, C6 & C7 under fluoroscopy is not medically necessary or appropriate.