

Case Number:	CM13-0022984		
Date Assigned:	11/15/2013	Date of Injury:	03/19/1999
Decision Date:	01/31/2014	UR Denial Date:	08/05/2013
Priority:	Standard	Application Received:	09/11/2013

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 Family Practice, and is licensed to practice in Texas. 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. 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 patient is a 54 year-old female who reported an injury on 03/19/1999. The mechanism of injury was not provided in the medical records. The patient's symptoms were noted to be low back pain and left lower extremity pain. She was also noted to be post laminectomy and has had several back surgeries. The 07/25/2013 note states it had been well over a year since her last epidural injection and it had given her 80% relief for a year; however, the patient had an epidural steroid injection on 01/21/2013. It is also indicated that her injection on 01/21/2013 had given her excellent relief for 4 months. Request was made for a repeat injection. Objective findings include positive bilateral straight leg raise tests, decreased strength in the left lower extremity noted as hallus longus 4+/5, decreased sensation to pinprick and light touch in the left L5 and S1 dermatomes, and the patient was also noted to have absent reflexes in the left lower extremity. Her diagnoses are noted as pain in the thoracic spine and post-laminectomy syndrome in the lumbar region. An MRI was provided in the medical records; however, the date and results are illegible. An office note indicated that the patient's recent MRI showed previous surgical scars at L5-S1 with no mention of disc herniation or foraminal stenosis.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 Caudal Epidural Steroid Injection at L5-S1: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Epidural Steroid Injections (ESIs) Page(s): 46.

Decision rationale: California MTUS Guidelines state criteria for the use of epidural steroid injections includes radiculopathy must be documented by physical examination and corroborated by imaging studies and/or electrodiagnostic testing. Additionally, it is specified that repeat blocks should be based on continued objective documented pain and functional improvement, including at least 50% pain relief with associated reduction in medication use for 6 to 8 weeks. The patient was noted to have subjective and objective findings consistent with radiculopathy; however, as the patient's MRI was not legible and office notes state that it revealed postsurgical findings, but it was not mentioned whether there were any disc herniations or bulges resulting in neural foraminal stenosis/nerve root impingement. Additionally, it was noted that her epidural steroid injection on 01/21/2013 had provided excellent relief for 4 months, but the documentation did not specify whether she obtained at least 50% pain relief with associated reduction of her medications. With the absence of corroborative imaging study or electrodiagnostic study results, and the required details regarding her relief from her previous injection, the request is not supported. Therefore, the request is non-certified.