

<b>Case Number:</b>	CM13-0028717		
<b>Date Assigned:</b>	12/27/2013	<b>Date of Injury:</b>	09/29/2001
<b>Decision Date:</b>	04/18/2014	<b>UR Denial Date:</b>	09/17/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/24/2013

### 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 Physical Medicine & Rehabilitation 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 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:

This is a 52-year-old male patient with a reported date of injury 09/29/2001. The mechanism of injury was that the patient injured lumbar spine while working for the [REDACTED]. The patient has a history of low back pain and bilateral lower extremity radiculopathy. The patient has a permanent spinal cord stimulator that the patient reports provides significant pain relief for leg pain. However, the patient continues to report that most of the pain is in the low back. Medications have included Opana ER 10 mg twice a day, Percocet 10/325 mg every 4 to 6 hours as needed, naproxen 550 mg twice a day, Medrox patches, trazodone 50 mg tabs, Lexapro 5 mg twice a day, and Wellbutrin 100 mg 2 times a day, and Ambien 10 mg at bedtime.

### IMR ISSUES, DECISIONS AND RATIONALES

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

#### **BILATERAL LUMBAR SPINE MEDIAL BRANCH BLOCKS AT L3, L4 & L5:**

Overturned

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 300.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 301. Decision based on Non-MTUS Citation LOW BACK.

**Decision rationale:** The Expert Reviewer's decision rationale: The CA MTUS/ACOEM Guidelines state "There is good quality medical literature demonstrating that radiofrequency neurotomy of facet joint nerves in the cervical spine provides good temporary relief of pain. Similar quality literature does not exist regarding the same procedure in the lumbar region. Lumbar facet neurotomies reportedly produce mixed results. Facet neurotomies should be performed only after appropriate investigation involving controlled differential dorsal ramus medial branch diagnostic blocks." In addition, the Official Disability Guidelines states "Not recommended except as a diagnostic tool. Minimal evidence for treatment." The request for bilateral lumbar spine medial branch blocks at L3, L4, and L5 are certified. On physical exam, 12/20/2013, the impression was lumbar facet syndrome, L4-5 moderate central narrowing with moderate facet changes, mild bilateral foraminal narrowing with L2-3, L3-4, and L5-S1 disc disease and spinal cord stimulator implant. Lumbar levoscoliosis, depression, and chronic pain were also noted. Treatment plan was for a future lumbar radiofrequency ablation. The guidelines state that medial branch blocks are for treating facet pain. The documentation submitted for review indicated that the patient has had prior conservative care, which included prior medial branch block injections (response not provided), medication management, a psychological evaluation, and a spinal cord stimulator implant. Given that on physical exam 12/20/2013, there was lumbar facet syndrome and plan for radiofrequency ablation, the request is certified.