

<b>Case Number:</b>	CM13-0030103		
<b>Date Assigned:</b>	05/23/2014	<b>Date of Injury:</b>	08/14/2007
<b>Decision Date:</b>	06/11/2014	<b>UR Denial Date:</b>	08/22/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/26/2013

### 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 and Rehabilitation 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 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 60 year-old patient sustained an injury on 8/14/07 from mis-stepping down his truck and fell while employed by the [REDACTED]. Request under consideration include Selective Nerve Root Block L3, L4, L5 on the Right Side. Report of 8/9/13 noted the patient underwent the right selective nerve root blocks at L3, L4, and L5 on 7/29/13 with 75% relief for one week. Symptoms described were low back pain radiating to bilateral legs. Exam showed lumbar tenderness; limited range of motion. Treatment has included work modification, medications, physical therapy, lumbar epidural steroid injections, lumbar nerve block injections, TENS unit, facet medial branch nerve blocks with cyst aspiration, Radifrequency ablation, and bilateral SI joint injections. The request for right lumbar nerve root blocks was non-certified on 8/22/13 citing guidelines criteria and lack of medical necessity.

### IMR ISSUES, DECISIONS AND RATIONALES

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

#### **SELECTIVE NERVE ROOT BLOCK L3, L4, L5 ON THE RIGHT SIDE: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 300, Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation AMA Guidelines (Radiculopathy), page 45

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back, Facet

Joint Diagnostic Blocks (Therapeutic Injections), pages 412-418: Not Recommended Except As A Diagnostic Tool.

**Decision rationale:** Per ODG, facet blocks are not recommended except as a diagnostic tool as there is minimal evidence for treatment and current evidence is conflicting as to this procedure. At this time no more than one therapeutic intra-articular block is suggested and with positive significant relief for duration of at least 6 weeks, the recommendation is to proceed with subsequent neurotomy. The patient has had previous lumbar nerve blocks with recent procedure at 3 levels providing one week relief. Additionally, facet blocks are not recommended in patient who may exhibit radicular symptoms as in this injured worker with radiculopathy, leg pain complaints and previous lumbar epidural steroid injections. Facet blocks are also not recommended without defined imaging correlation not demonstrated here nor are they recommended over 2 joint levels concurrently as requested in this case without remarkable clinical findings. Submitted reports have not demonstrated support outside guidelines criteria. The Selective Nerve Root Block L3, L4, L5 on the Right Side is not medically necessary and appropriate.