

<b>Case Number:</b>	CM13-0037067		
<b>Date Assigned:</b>	12/13/2013	<b>Date of Injury:</b>	06/25/2009
<b>Decision Date:</b>	02/10/2014	<b>UR Denial Date:</b>	10/03/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/22/2013

### 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 Pain Management 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. 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 male patient with the date of injury of June 25, 2009. A utilization review determination dated October 3, 2013 recommends non-certification of unilateral cervical epidural steroid injection, C5 and C6. The previous reviewing physician recommended non-certification of unilateral cervical epidural steroid injection, C5 and C6 due to no recorded testing for dermatomal sensation over the bilateral upper extremities and Spurling's maneuver to support the diagnosis of radiculopathy and the patient's detailed clinical and functional responses to prior physical therapy were not explicitly stated to suggest failure of conservative care. A Pain Management Reevaluation/Follow up Visit from November 18, 2013 identifies current chief complaints of right arm pain/shoulder pain. A MRI of C-Spine on 5/3/11 shows at C5-6 a 3-4 mm lateralizing bulge with ridge and moderate central canal stenosis. There is moderately severe left greater than right neural foramina stenosis due to ridge and bulge. The physical examination identifies numbness on ulnar side. The diagnoses include cervicalgia, degenerative cervical intervertebral disc, displacement cervical disc w/o myelopathy, and cervical spondylosis w/ myelopathy. The treatment plan/discussions/recommendations note continues medical management.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Unilateral cervical epidural steroid injection, C5 & C6: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints, Chronic Pain Treatment Guidelines.

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

**Decision rationale:** Regarding the request for unilateral cervical epidural steroid injection, C5 & C6, California MTUS cites that ESI is recommended as an option for treatment of radicular pain (defined as pain in dermatomal distribution with corroborative findings of radiculopathy), and radiculopathy must be documented by physical examination and corroborated by imaging studies and/or electrodiagnostic testing. Within the documentation available for review, it is noted that the patient presents with radicular pain which was corroborated by imaging studies. However, physical examination identifies nonspecific documentation of ulnar side numbness. The Guidelines state radiculopathy must be documented by physical examination. There is no specific documentation of physical examination findings consistent with radiculopathy at the C5 and C6 levels. In the absence of such documentation, the currently requested unilateral cervical epidural steroid injection, C5 & C6 is not medically necessary.