

Case Number:	CM13-0038683		
Date Assigned:	12/18/2013	Date of Injury:	11/14/2012
Decision Date:	10/07/2014	UR Denial Date:	09/13/2013
Priority:	Standard	Application Received:	10/01/2013

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 Family Practice, has a subspecialty in Preventative 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 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 male claimant sustained a work injury on involving the low back. He was diagnosed with lumbar radiculopathy. He had progressive worsening pain. An MRI had shown L3-L4 disc protrusion with scoliosis. He underwent 1 of 3 epidural steroid injections for pain on 1/29/14. A few days after the procedure he noted to have improved range of motion and some improvement in pain. The claimant had not been on oral analgesics at the time.

IMR ISSUES, DECISIONS AND RATIONALES

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

LESI (LUMBAR EPIDURAL STEROID INJECTION): Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines EPIDURAL STEROID INJECTIONS Page(s): 46.

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

Decision rationale: According to the ACOEM guidelines, epidural steroid injections are not recommended. Invasive techniques are of questionable merit. Epidural Steroid Injections may provide short-term improvement for nerve root compression due to a herniated nucleus pulposus. The treatments do not provide any long-term functional benefit or reduce the need for surgery. In this case, there was no recent use of oral analgesics to control the pain. IN addition, the claimant

did not have a herniated nucleus pulposus. The request, therefore, for a lumbar epidural steroid injections is not medically necessary.