

Case Number:	CM13-0040904		
Date Assigned:	03/21/2014	Date of Injury:	03/25/2010
Decision Date:	04/28/2014	UR Denial Date:	10/22/2013
Priority:	Standard	Application Received:	10/29/2013

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 Preventive 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:

According to the records made available for review, this is a 52-year-old female with a 3/25/10 date of injury. At the time (10/3/13) of request for authorization for trigger point injection of the cervical spine, there is documentation of subjective (cervical neck pain that is aching and burning and radiates to the right shoulder, arm, wrist, and hand) and objective (palpable trigger points along the bilateral cervical paraspinal musculature that reproduce pain and upon palpation the pain radiates toward the shoulders) findings, current diagnoses (myofascial pain syndrome/piriformis syndrome and displacement of cervical intervertebral disc without myelopathy), and treatment to date (cervical paraspinal trigger point injections in 2011, with at least 50% relief (able to pick things up with right arm with less struggle as well as decrease in intensity and frequency of headaches), physical therapy, and medications). Medical report identifies that it is difficult for patient to recall the duration of relief as it has been over two years since these injections. There is no documentation that radiculopathy is not present; no more than 3-4 injections per session; that pain relief was obtained for six weeks after previous injections; and functional benefit or improvement as a reduction in work restrictions; an increase in activity tolerance; and/or a reduction in the use of medications as a result of previous trigger point injections.

IMR ISSUES, DECISIONS AND RATIONALES

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

TRIGGER POINT INJECTION OF THE CERVICAL SPINE: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Trigger Point Injections. Page(s): 122.

Decision rationale: MTUS Chronic Pain Medical Treatment Guidelines identifies documentation of myofascial pain syndrome; circumscribed trigger points with evidence upon palpation of a twitch response as well as referred pain; symptoms have persisted for more than three months; medical management therapies (such as ongoing stretching exercises, physical therapy, NSAIDs and muscle relaxants) have failed to control pain; radiculopathy is not present (by exam, imaging, or neuro-testing); and no more than 3-4 injections per session, as criteria necessary to support the medical necessity of trigger point injections. Additionally MTUS Chronic Pain Medical Treatment Guidelines identifies documentation of greater than 50% pain relief is obtained for six weeks after an injection, documented evidence of functional improvement, and injections not at an interval less than two months, as criteria necessary to support the medical necessity of repeat trigger point injections. MTUS-Definitions identifies that any treatment intervention should not be continued in the absence of functional benefit or improvement as a reduction in work restrictions; an increase in activity tolerance; and/or a reduction in the use of medications or medical services. Within the medical information available for review, there is documentation of diagnoses of myofascial pain syndrome/piriformis syndrome and displacement of cervical intervertebral disc without myelopathy. In addition, there is documentation of circumscribed trigger points with evidence upon palpation of a twitch response as well as referred pain; that symptoms have persisted for more than three months; and medical management therapies (physical therapy and medications) have failed to control pain. Furthermore, there is documentation of previous cervical paraspinous trigger point injections in 2011 with at least 50% pain relief with the ability to pick things up with right arm with fewer struggles as well as decrease in intensity and frequency of headaches. However, given documentation of subjective findings (cervical neck pain that is aching and burning and radiates to the right shoulder, arm, wrist, and hand), there is no documentation that radiculopathy is not present. In addition, there is no documentation of any more than 3-4 injections per session. Furthermore, despite documentation of at least 50% pain relief after previous injections, there is no documentation of pain relief was obtained for six weeks after previous injections. Lastly, despite documentation that patient was able to pick things up with right arm with less struggle and decrease in intensity and frequency of headaches after previous injections, there is no documentation of functional benefit or improvement as a reduction in work restrictions; an increase in activity tolerance; and/or a reduction in the use of medications as a result of previous trigger point injections. Therefore, based on guidelines and a review of the evidence, the request for trigger point injection of the cervical spine is not medically necessary.