

Case Number:	CM13-0042570		
Date Assigned:	12/27/2013	Date of Injury:	01/31/2013
Decision Date:	05/06/2014	UR Denial Date:	10/14/2013
Priority:	Standard	Application Received:	10/30/2013

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 Orthopedic Surgery 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 is a 25-year-old gentleman who sustained an injury to the low back in a work-related accident on 1/31/13. The records provided for review included a report of an MRI of the lumbar spine dated 1/8/14 that showed disc desiccation at the L5-S1 level with a focal disc protrusion at L5-S1 displacing the exiting S1 nerve root. An assessment dated 12/12/13 noted ongoing complaints of pain in the low back radiating pain to the bilateral thighs. Physical examination revealed equal and symmetrical reflexes, normal sensation, and 5/5 motor testing. The claimant was diagnosed with disc protrusion. The recommendation for an MRI scan that was ultimately performed in January was made as well as an epidural steroid injection. This request is for "trigger point impedance imaging" of the lumbar spine.

IMR ISSUES, DECISIONS AND RATIONALES

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

Trigger point impedance imaging lumbar spine: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303-305.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 287, 303.

Decision rationale: California ACOEM Guidelines do not specifically address trigger point imaging but their guide to imaging recommends that imaging and other tests are not helpful in the absence of red flags. The specific request in this case cannot be supported. The claimant's current clinical picture, including prior imaging and physical examination findings, give a clear clinical picture of the current working diagnosis. There is no documentation of red flags in the claimant's physical examination to warrant further diagnostic imaging. There would be no specific indication for "trigger point" impedance imaging for further assessment of the claimant's myofascial complaints.