

Case Number:	CM13-0048151		
Date Assigned:	01/03/2014	Date of Injury:	01/01/2011
Decision Date:	04/21/2014	UR Denial Date:	10/04/2013
Priority:	Standard	Application Received:	11/05/2013

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 has a subspecialty in Interventional Spine 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:

The patient is 48 year old female with date of injury 01/01/2011. The listed diagnoses per [REDACTED] dated 09/12/2013 are multiple level cervical disc protrusions, C3-C4 through C6-C7 levels and cervicgia with bilateral cervical radiculitis. According to the progress report dated 09/12/2013 by [REDACTED], this patient presents with persistent neck pain radiating to her bilateral arms and hands, greater on the left than the right. She also reports numbness down the left arm. She has utilized physical therapy and medications. Physical examination shows moderately limited cervical range of motion in flexion, extension and rotation. There is tenderness upon palpation of the cervical spine and adjacent paraspinous regions bilaterally. There is also decreased sensation down the left arm as compared to the right. The provider mentions an MRI of the cervical spine showing disc protrusions of the C3-C4, C4-C5 and C6-C7 level; no significant stenosis were present. The provider is requesting 1 cervical epidural injection at the right C3-4 and C4-5 levels under fluoroscopic guidance.

IMR ISSUES, DECISIONS AND RATIONALES

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

CERVIAL EPIDURAL STEROID INJECTION AT THE RIGHT C3-4 AND C4-5 LEVELS, UNDER FLUOROSCOPIC GUIDANCE: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Epidural Steroid Injection Section Page(s): 46-47.

Decision rationale: This patient presents with chronic neck pain radiating into her bilateral arms and hands. The provider is requesting one cervical epidural injection at the right C3-4 and C4-5 levels under fluoroscopic guidance. The California MTUS page 46,47 states that an ESI is "Recommended as an option for treatment of radicular pain (defined as pain in dermatomal distribution with corroborative findings of radiculopathy)." The California MTUS further states, "Radiculopathy must be documented by physical examination and corroborated by imaging studies and/or electrodiagnostic testing." The report dated 09/26/2013 by [REDACTED], shows that the patient has radicular symptoms with pain going down the arms. However, the MRI of C-spine showed disc protrusions at multiple levels without stenosis. In this case, while the patient has pain down the arms, it is not in a specific dermatomal distribution that would be explained by the MRI findings. Documentation of radiculopathy require dermatomal distribution of pain/paresthesia that is explained and corroborated by an imaging study. There is no report of EMG showing radiculopathy either. The provider has asked for injections at C3-4 and C4-5, but radiculopathies at the corresponding levels are not described. Recommendation is for denial.