

<b>Case Number:</b>	CM13-0050368		
<b>Date Assigned:</b>	12/27/2013	<b>Date of Injury:</b>	11/03/2007
<b>Decision Date:</b>	06/04/2014	<b>UR Denial Date:</b>	10/29/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/12/2013

### 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:

According to report dated 10/30/2013 by [REDACTED], the patient continues to complain of pain in the neck radiating into both arms. It was noted that the patient was seen by [REDACTED], an orthopedic spine specialist, who has directed attention towards treatment of her cervical spondylosis condition. She has received steroid injections from [REDACTED]. The patient reports following the steroid injections, she had remarkable relief of symptoms in her neck and arm. She currently reports an increase in symptoms. The treating physician reports "under usual circumstances, a series of 3 steroid injections is required." Report from 01/30/2013 does provide a physical examination. On this date the patient presented with pain in the neck with a radicular pattern. There is also stiffness with bilateral neck pain noted. [REDACTED] review of records in report from 12/30/2013 indicates there was an MRI scan performed in 2011 that revealed cervical radiculopathy as identified by [REDACTED]. This MRI report was not provided for review. Utilization review is dated 10/29/2013.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**SERIES OF THREE (3) EPIDURAL STEROID INJECTION OF THE CERVICAL SPINE LEFT C4-5 AND A SERIES OF THREE (3) EPIDUROGRAPHY: Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

**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. Treating physician is requesting a series of 3 epidural steroid injections to the left C4-C5 and a series of 3 epidurography. The MTUS Guidelines has the following regarding ESI under chronic pain section page 46 and 47, "Recommended as an option for treatment of radicular pain". It goes on to state under criteria for use, "Current research does not support series of 3 injections in either the diagnostic or therapeutic phase. We recommend no more than 2 ESI injections". For repeat injections during therapeutic phase, "Continued objective documented pain and functional improvement including at least 50% pain relief with associated reduction of medication use for 6 to 8 weeks with a general recommendation of no more than 4 blocks per year". Review of the medical file shows the patient underwent a cervical epidural injection on 05/16/2013. Subsequent progress reports do not indicate at least 50% pain relief or any reduction in medication. Furthermore, MTUS does not support "series of 3" injections. The request is not medically necessary or appropriate.