

Case Number:	CM13-0063085		
Date Assigned:	12/30/2013	Date of Injury:	04/01/1994
Decision Date:	08/07/2014	UR Denial Date:	11/29/2013
Priority:	Standard	Application Received:	12/09/2013

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 and is licensed to practice in California and Washington. 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 injured worker is a 54-year-old with a reported date of injury on April 1, 1994. The mechanism of injury was not submitted within the medical records. His diagnoses were noted to include cervical disc disease, lumbar disc disease, brachial neuritis or radiculitis, postlaminectomy syndrome to the cervical region, facet syndrome, fibromyalgia, thoracic or lumbosacral neuritis or radiculitis, cervicgia, lumbar postlaminectomy syndrome, neuralgia-occipital, and lumbago. His previous treatments were noted to include physical therapy, surgery, trigger point injections, and medications. The progress note dated October 10, 2013 revealed the injured worker was requesting trigger point injections for the neck and upper trapezius, reporting that the trigger point injections typically provide two weeks of relative relief. The physical examination revealed to the cervical spine no tenderness of the sternocleidomastoid, the supraclavicular fossa, the trapezius, or the levator scapula. There was tenderness noted to the paracervicals, the scalene muscle, and the rhomboid, and trapezius trigger point pain and supraspinatus trigger point pain. There were palpable spasms to the left upper trapezius and palpation also noted tenderness of the paracervicals and trapezius trigger point pain. There were trigger points noted to the bilateral upper trapezius muscles. The provider indicated a total of six trigger point injections were given into the bilateral upper trapezius muscles and cervical paravertebral muscles. The progress note dated November 22, 2013 revealed the injured worker complained of increased stiffness to the cervical spine and upper trapezius which he reported was not responding to his usual means of relief of heat, massage, and stretching. The injured worker was requesting trigger point injections which he stated generally provided him up to 2 weeks of relief. The physical examination revealed trigger point pain to the lumbar spine bilaterally at L3-4 and right thoracic 4-5. The provider reported injection of four trigger point injections to the

bilateral upper trapezius muscles. The Request for Authorization Form dated November 20, 2013 was for trigger point injection due to muscular pain.

IMR ISSUES, DECISIONS AND RATIONALES

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

Six trigger point injections to the neck and upper trapezius on October 10, 2013: Upheld

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

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

Decision rationale: The injured worker has received previous trigger point injections that gave him pain relief for two weeks. The California Chronic Pain Medical Treatment Guidelines recommend trigger point injections only for myofascial pain syndrome. Trigger point injections with an anesthetic such as bupivacaine are recommended for non-resolving trigger points, with the addition of a corticosteroid is not generally recommended. Trigger point injections are not recommended for radicular pain. The guideline criteria for trigger point injections are documentation of circumscribed trigger points with evidence upon palpation of a twitch response as well as referred pain. The symptoms have persisted for more than three months. The medical management therapy such as ongoing stretching, exercises, physical therapy, NSAIDs (non-steroidal anti-inflammatory drugs), and muscle relaxants have failed to control the pain. Radiculopathy is not present by examination or imaging. The guidelines state not more than three to four injections per session and no repeat injections unless a greater than 50% pain relief is obtained for six weeks after an injection and there is documented evidence of functional improvement. Additionally, frequency should not be at an interval of less than two months. There is a lack of documentation regarding objective functional improvement with the trigger point injections. The documentation provided indicated the injured worker received pain relief for two weeks and the guidelines recommend repeat injections for a greater than 50% pain relief for six weeks. The guidelines also state frequency should not be at an interval of less than two months and the trigger point injections have been given two times per month. Additionally, the guidelines state no more than three to four injections per session and the injured worker has been receiving four to six at each session. Therefore, due to the lack of documentation regarding objective functional improvement and more than three to four injections per session, the trigger point injection retrospective request is not warranted. The retrospective request for six trigger point injections to the neck and upper trapezius on October 10, 2013 is not medically necessary or appropriate.