

Case Number:	CM14-0007337		
Date Assigned:	02/10/2014	Date of Injury:	07/27/2011
Decision Date:	07/14/2014	UR Denial Date:	01/06/2014
Priority:	Standard	Application Received:	01/20/2014

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 Occupational 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:

The patient is a 36-year-old male who has submitted a claim for lumbago associated with an industrial injury date of July 27, 2011. The patient complains of continued low back and left leg pain. Surgical history included L4-5 and S1 nerve root decompression; left L4-5 subtotal hemilaminectomy, foraminotomy, extruded disc removal, and partial discectomy; and left L4 extraforaminal/extrapedicular nerve root decompression on 05/10/2012. Neurologic examination was normal. MRI of the lumbar spine dated August 28, 2012 showed post-op changes at the L4-5 and L5-S1, and evidence of a possible tear in the annulus fibrosis at the L4-5. CT scan of the lumbar spine performed on April 24, 2013 revealed grade 5 disc bulge at L3-L4 and L5-S1 and grade 4 disc bulge at L4-L5. Electrodiagnostic studies done on September 19, 2012 concluded that there was no evidence of radiculopathy or neuropathy in the bilateral lower extremities. The diagnoses include chronic low back pain, left L4-5 herniated nucleus pulposus and status post left L4-L5 laminotomy and discectomy. Treatment plan includes a request for left L5 nerve root block. Treatment to date has included oral analgesics, epidural injections, home exercises, massage, physical therapy, and lumbar spine surgeries. Utilization review from January 6, 2014 denied the prospective request for 1 left L5 nerve root block because there were no physical findings to support radicular pain on the most recent clinical documentation. Additionally, there was no recent documentation of conservative therapy to address the patient's pain.

IMR ISSUES, DECISIONS AND RATIONALES

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

LEFT L5 NERVE ROOT BLOCK: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Criteria for the use of Epidural Steroid Injections Page(s): 46.

Decision rationale: According to page 46 of the CA MTUS Chronic Pain Medical Treatment Guidelines, criteria for the use of epidural steroid injections include documented radiculopathy by physical examination corroborated by imaging studies and/or electrodiagnostic testing; and unresponsiveness to conservative treatment. In this case, there was no evidence of radiculopathy based on physical examination findings and imaging studies. Electrodiagnostic studies done on September 19, 2012 concluded that there was no evidence of radiculopathy or neuropathy in the bilateral lower extremities. Furthermore, there was no discussion of response to conservative treatment. The guideline criteria were not met. There was no compelling rationale concerning the need for variance from the guideline. Therefore, the request for left L5 nerve root block is not medically necessary.