

<b>Case Number:</b>	CM14-0104868		
<b>Date Assigned:</b>	07/30/2014	<b>Date of Injury:</b>	08/10/2008
<b>Decision Date:</b>	09/26/2014	<b>UR Denial Date:</b>	06/30/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/08/2014

### 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 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 a 43-year-old male with a date of injury of 08/10/2008. The listed diagnoses per [REDACTED] are; cervical facet pain, left lumbar facet pain involving L4-L5 and L5-S1 and left scapulothoracic syndrome based on physical exam and history. According to progress report 04/14/2014, the patient presents with continued complaints of low back pain. He has confirmed left lumbar facet pain with medial branch block done on 01/27/2014. The patient also has noted pain around his left scapula. Examination revealed, "prominent infraspinatus trigger points in the middle scapula and five trigger points over the medial border of the scapula." Treating physician is requesting "a total of 5 trigger points over the 3 muscles, medial trapezius, medial scapular, and also the infraspinatus trigger point." Utilization review denied the request on 06/30/2014.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Trigger Point Injections (5 Trigger Points over 3 muscles; medial trapezius, medial scapular, and infraspinatus trigger point): Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Trigger Point Injections: Criteria for the use of Trigger point injections Page(s): 122.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Trigger point injections Page(s): 122.

**Decision rationale:** This patient presents with low back pain and pain around his left scapula. The treating physician is requesting a total of 5 trigger points over the medial trapezius, medial scapular, and infraspinatus trigger point. MTUS Guidelines has the following regarding trigger point injections, "Recommended only for myofascial pain syndrome with limited lasting value and not recommended for radicular pain." MTUS further states the criteria for trigger points includes, "documentation of trigger points upon palpation of twitch response, symptoms persist for more than 3 months, medical management therapy, radiculopathy is not present, not more than 3 to 4 injections per session, and no repeat injections unless greater than 50% relief is obtained, etc." In this case, the treating physician is requesting 5 injections and MTUS Guidelines states "not more than 3 to 4 injections per session." Furthermore, the treating physician does not note evidence of "twitch response" or taut bands as required by MTUS on examination. The request is not medically necessary.