

Case Number:	CM14-0130195		
Date Assigned:	09/29/2014	Date of Injury:	01/15/2014
Decision Date:	10/28/2014	UR Denial Date:	07/15/2014
Priority:	Standard	Application Received:	08/14/2014

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 Pain Medicine and is licensed to practice in Minnesota. 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 female who reported a work-related injury on 01/15/2014. Mechanism of injury was due to her being pinned between 2 slow moving cars, trapping her left flank for a period of approximately 15 seconds. The injured worker's diagnoses consist of closed fracture of the lumbar vertebra without spinal cord injury, thoracic spondylosis, and thoracic sprain. The injured worker's past treatment has included home exercise program (HEP) and surgical intervention. The injured worker's diagnostics include an x-ray dated 01/16/2014, which revealed mild compression deformity of what was thought to be the T11 level primarily involving the superior endplate. There were mild degenerative changes present in slight dextroconvex curvature. An MRI dated 03/10/2014 of the thoracic spine without contrast revealed focal superior endplate invagination of T11 with some minimal reactive marrow changes and an acute focal endplate fracture or traumatic Schmorl's node. The injured worker's surgical history includes a vertebroplasty at T11; specifics of this surgery were not provided for review. Upon examination on 07/07/2014, the injured worker complained of symptoms in the thoracic spine. The injured worker stated the longer she was on her feet, the more aching she had on the thoracic spine. The injured worker's experienced a sense of significant tenderness with a diaper pressure in the mid to lower thoracic spine. The injured worker had tenderness on the lower thoracic spine. She also complained of a pressure sensation in the lower thoracic spine, as well as a burning sensation in the right lower thoracic spine. The injured worker was noted to not take any medications. The treatment plan consisted of T10-11 and T11-12 facet joint injections. The rationale for the request and a Request for Authorization form were not submitted for review.

IMR ISSUES, DECISIONS AND RATIONALES

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

T10-11, T11-12 thoracic facet injections: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Low back, Facet joint injects, thoracic

Decision rationale: The request for T10-11, T11-12 thoracic facet injections is not medically necessary. According to the Official Disability Guidelines, injection to the thoracic spine is not recommended. There is limited research on therapeutic blocks or neurotomies in this region, and the latter procedure is not recommended. Recent publications on the topic of therapeutic facet injections have not addressed the use of this modality for the thoracic region. As such, the request for T10-11, T11-12 thoracic facet injections is not medically necessary.