

<b>Case Number:</b>	CM14-0158866		
<b>Date Assigned:</b>	10/02/2014	<b>Date of Injury:</b>	07/04/2010
<b>Decision Date:</b>	11/06/2014	<b>UR Denial Date:</b>	09/11/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/29/2014

### 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 applicant is a represented [REDACTED] employee who has filed a claim for chronic low back pain reportedly associated with an industrial injury of July 04, 2010. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representation, transfer of care to and from various providers in various specialties; trigger point injections; Adjuvant medications; opioid therapy; earlier lumbar laminectomy surgery in March 2011; and unspecified amounts of physical therapy over the course of the claim. In a Utilization Review Report dated September 11, 2014, the claims administrator denied a request for an epidural steroid injection at L5-S1. The applicant's attorney subsequently appealed. In a September 02, 2014 progress note, the applicant reported persistent complaints of low back pain radiating to the left leg. The applicant was using Neurontin, Cymbalta, methadone, and Norco. The applicant did have some depressive symptoms, it was further noted. The applicant apparently had evidence of a large disk herniation at L3-L4 and L5-S1. Multiple palpable tender points are noted. The applicant exhibited an antalgic gait. The applicant was visibly anxious. Positive straight leg raising was noted with left lower extremity strength ranging from 4-5/5 versus 5/5 about the right leg. The applicant had evidence of electro diagnostically confirmed L4-L5 radiculopathy noted on September 22, 2011, it was further noted. An L5-S1 epidural steroid injection was sought at L5-S1 while Norco, Naprosyn, Prilosec, and methadone were refilled. Additional electrodiagnostic testing was sought for surgical planning purposes. It was stated that the applicant was likely a candidate for a lumbar fusion surgery.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Outpatient transforaminal epidural steroid injection at bilateral L5-S1: Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Epidural steroid injections (ESIs).

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines EPIDURAL STEROID INJECTIONS Page(s): 46.

**Decision rationale:** 1. No, the proposed L5-S1 Epidural Steroid Injection is not medically necessary, medically appropriate, or indicated here. As noted on page 46 of the MTUS Chronic Pain Medical Treatment Guidelines, the purpose of epidural steroid injection therapy is to reduce pain and inflammation so as to facilitate progress in more active treatment programs and "avoiding surgery." In this case, however, the attending provider has written on several occasions that the applicant is a candidate for a multilevel lumbar fusion surgery and it is further stated that he is seeking electrodiagnostic testing to help in surgical planning/surgical targeting. The applicant does have evidence of several large disk herniations and spinal stenosis, multilevel. The applicant is seemingly intent on pursuing a surgical remedy, making the applicant less than-optimal candidate for epidural steroid injection therapy. Therefore, the request is not medically necessary.