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| <b>Case Number:</b>   | CM14-0172595 |                              |            |
| <b>Date Assigned:</b> | 10/23/2014   | <b>Date of Injury:</b>       | 02/17/2008 |
| <b>Decision Date:</b> | 12/02/2014   | <b>UR Denial Date:</b>       | 10/07/2014 |
| <b>Priority:</b>      | Standard     | <b>Application Received:</b> | 10/20/2014 |

### 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 Internal Medicine and is licensed to practice in New York. 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 claimant is a 60 year old female who sustained an industrial injury on 02/17/2008. The mechanism of injury was not provided for review. Her diagnoses include low back pain and right sacroiliac pain. She continues to complain of 8/10 low back pain and right sacroiliac pain. on physical exam there is spasm in the right piriformis and tenderness over the right sacroiliac joint. Gait is antalgic and to the right; there is moderate tenderness and spasm in the cervical paraspinal musculature. Axial compression test and Spurling's test are positive on the right . There is facet tenderness from C4-C7. Sensation is diminished over the right C6 dermatome. There is sacroiliac tenderness and right piriformis muscle tenderness causing sciatica-type symptoms. There is sacroiliac joint tenderness. Patrick's, Yeoman's and Thrust tests are positive on the right with weakness in the right knee extensors and right hip flexors. Treatment has included medications, physical therapy, chiropractic manipulative therapy, rest, and home exercises.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Right piriformis injection:** Overturned

**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) Hip and Pelvis Chapter

**Decision rationale:** Treatment options to alleviate the pain in the region of the piriformis include the use of local anesthetics, nonsteroidal anti-inflammatory medications (NSAIDs), transrectal massage, ultrasound treatment (~2 W/cm<sup>2</sup> for 5-10 min), and manual manipulation. Benson and Schutzer noted a success rate of approximately 85% after conservative treatment with manual therapy and local injections. The most widely recognized treatment is local injection. Local anesthetics (eg, lidocaine, bupivacaine) can be injected in trigger points. The painful piriformis muscle can be identified by palpating the buttocks or by palpating transrectally in males and transvaginally in females. A spinal needle or 25-gauge, 1.5-inch needle is directly aimed at the examining finger. The location is usually through the sciatic notch and inferior to the bony margin; the most common trigger point is 1 inch lateral and caudal to the midpoint of the lateral border of the sacrum. An intramuscular (IM) dose of 50-100 mg can be injected. Studies have established that ultrasound, MRI, and CT-guided piriformis injections can confirm the correct placement of the local anesthetic within the muscle. The review has indicated the patient has tried and failed conservative treatment modalities. She has findings consistent with piriformis irritation. Medical necessity for the requested item has been established. The requested item is medically necessary.