

Case Number:	CM14-0033222		
Date Assigned:	06/20/2014	Date of Injury:	02/07/2003
Decision Date:	07/22/2014	UR Denial Date:	03/12/2014
Priority:	Standard	Application Received:	03/17/2014

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 & Rehabilitation 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 72-year-old female who reported an injury on 02/07/2003. The mechanism of injury was not provided in the medical records. The clinical note dated 04/15/2014 indicated diagnoses of degenerative spondylolisthesis and spinal stenosis of lumbar region. On physical exam of the lumbar region, the injured worker's spinal motion was guarded and dysrhythmic. She had symmetrical muscle tone, bulk, and strength in the lower extremities and pelvic girdle musculature. The injured worker had diffuse tenderness in the low lumbar area around the right hip. The injured worker's prior treatments included diagnostic imaging and medication management. The injured worker's medication regimen included morphine sulfate, Vicodin, and Norco. The provider submitted a request for lumbar epidural steroid injection in the L4-5. A request for authorization was not submitted for review to include the date the treatment was requested.

IMR ISSUES, DECISIONS AND RATIONALES

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

Outpatient Lumbar Epidural Steroid Injection L4-5: 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 Injection, (ESIs) Page(s): 46..

Decision rationale: The request for Outpatient Lumbar Epidural Steroid Injection L4-5 is not medically necessary. The California Chronic Pain Medical Treatment Guidelines state state epidural steroid injection is recommended as an option for treatment of radicular pain (defined as pain in dermatomal distribution with corroborative findings of radiculopathy). Current recommendations suggest a second epidural injection if partial success is produced with the first injection and a third ESI is rarely recommended. The guidelines indicate radiculopathy must be documented by physical examination and corroborated by imaging studies and/or electrodiagnostic testing. Initially unresponsive to conservative treatment (exercises, physical methods, NSAIDs and muscle relaxants). Injections should be performed using fluoroscopy (live x-ray) for guidance. If used for diagnostic purposes, a maximum of two injections should be performed. A second block is not recommended if there is inadequate response to the first block. Diagnostic blocks should be at an interval of at least one to two weeks between injections. There was lack of evidence of the injured worker being unresponsive to conservative treatment. In addition, on physical examination, there was lack of evidence of radicular pain such as positive straight leg, decreased sensation. Furthermore, there was no MRI to corroborate radiculopathy. Therefore, the request for epidural steroid injection to the L4-5 is not medically necessary.