

Case Number:	CM14-0046914		
Date Assigned:	07/02/2014	Date of Injury:	12/19/2011
Decision Date:	08/29/2014	UR Denial Date:	04/14/2014
Priority:	Standard	Application Received:	04/14/2014

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 Physical Medicine and Rehabilitation and is licensed to practice in Illinois. 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 52-year-old male who reported injury on 12/29/2011. The injured worker had surgical intervention in 2012. The mechanism of injury was the injured worker fell from a ladder approximately 4 feet, jerking his shoulder. The injured worker underwent an MRI of the cervical spine on 07/25/2013 which revealed at the level of C5-6 there was broad-based disc osteophyte complex effacing the ventral subarachnoid space and leading to mild central canal stenosis. There was uncovertebral spurring with moderate to severe bilateral foraminal stenosis. At the level of C6-7 there was disc desiccation, moderate loss of disc height. There was a type II endplate change and broad-based disc osteophyte complex with mild thecal sac effacement. There was uncovertebral spurring with mild bilateral foraminal stenosis. The DWC Form RFA dated 10/07/2013 was for a right C5-6 and C6-7 transforaminal epidural steroid injection. The diagnosis included cervicalgia, pain in joint of shoulder, and pain in joint of multiple sites as well as drug dependence not otherwise specified. The Office Note dated 08/28/2013 revealed the injured worker had complaints of neck pain and right shoulder pain. The injured worker's medications included Medrox ointment, Naproxen, Omeprazole, MS-Contin 100 mg tablets, Oxycodone Hydrochloride, Clonidine, Hydrochloride, and Ibuprofen 600 mg. The documentation indicated the physical examination was unchanged from a previous visit. The treatment plan included a transforaminal Epidural Steroid Injection (ESIs) at C5-6, and C6-7 and a continuation of a TENS unit.

IMR ISSUES, DECISIONS AND RATIONALES

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

C5-6, C6-7 Transforaminal Epidural Steroid Injections (ESIs): Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Epidural Steroid Injections.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Epidural Steroid Injection Page(s): 46.

Decision rationale: The California MTUS Guidelines recommend for the use of an (ESIs) there should be documentation of objective findings upon physical examination to support radiculopathy, and there should be corroboration through EMG/NCV or MRI findings. There should be documentation of a failure of conservative care including physical medicine, NSAIDs, and muscle relaxants. The clinical documentation submitted for review failed to meet the above criteria. There was no objective physical examination supplied for review. There was a lack of documentation through MRI or Electro Diagnostic studies that the injured worker had nerve impingement. There was a lack of documentation of a failure of conservative care. Given the above, the request for C5-6, C6-7 transforaminal epidural steroid injection (ESIs) is not medically necessary.