

Case Number:	CM14-0054178		
Date Assigned:	07/07/2014	Date of Injury:	06/03/2011
Decision Date:	08/12/2014	UR Denial Date:	03/19/2014
Priority:	Standard	Application Received:	04/23/2014

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 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 injured worker is a 56-year-old male who reported an injury on 06/03/2011 of unknown mechanism of injury. The injured worker had a history of left-sided neck pain. The injured worker had diagnoses of cervical discogenic disease, left leg radiculitis, cervical sprain/strain, lumbar sprain/strain, myofascial sprain/strain, and chronic pain syndrome secondary to trauma. The prior diagnostics included an electromyogram and a nerve conduction study that revealed normal findings. The injured worker had an anterior cervical discectomy and fusion in 04/2013 to the C5-6, and C6-7 region. The objective findings dated 04/21/2014 revealed strength to the left finger flexors and intrinsic muscles to the left hand are 4/5, sensory loss to light touch, pinprick, 2 point discrimination at 1st, 4th, and 5th fingers of the left hand. The objective findings dated 04/21/2014 also revealed deep tendon reflexes were symmetric, normal gait, severe muscle spasm to the left trapezius muscle, and positive Tinel's sign in the region of the left brachial plexus. The Adson's and Roos tests included in the brachial plexus stress testing were positive on both sides and elevation of the left arm caused increased weakness and numbness sensation of the left hand with shaking of the left hand. The past treatment included H-wave and topical analgesics. The medication included hydrocodone and gabapentin, no dosage was given. The treatment plan included ultrasound of the brachial plexus with injection, continue medication, and continue H-wave. The authorization dated 07/07/2014 was submitted with documentation. The rationale was that the injured worker was having numbness and weakness sensation to the left hand; therefore, the request for an ultrasound of the brachial plexus with injection.

IMR ISSUES, DECISIONS AND RATIONALES

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

Ultrasound of brachial plexus with injection Scalenus anterior muscle: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints Page(s): 201-205.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Neck and upper back (acute and chronic) and Shoulder, Nerve blocks.

Decision rationale: The request for ultrasound of brachial plexus with injection is non-certified. The Official Disability Guidelines do not recommend ultrasound with injections in uncomplicated back pain, its use would be experimental at best. Patients that are receiving steroid injections for lower cervical radicular pain, the ultrasound guided selective cervical nerve root blocks were as effective as the fluoroscopy guided transforaminal blocks in pain relief and functional improvements, in addition to the absence of radiation from real-time imaging. As such the request is non-certified.