

<b>Case Number:</b>	CM14-0206186		
<b>Date Assigned:</b>	12/18/2014	<b>Date of Injury:</b>	02/03/1999
<b>Decision Date:</b>	02/12/2015	<b>UR Denial Date:</b>	12/04/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	12/09/2014

### 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 Rehab, has a subspecialty in Pain 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:

This is a patient with a date of injury of 2/3/99. A utilization review determination dated 12/4/14 recommends non-certification/modification of left L4-5 and L5-S1 facet injection. 11/19/14 medical report identifies back pain radiating to the extremities. Trigger point injection gave 85% reduction in pain. On exam, there is positive SLR on the left and decreased left S1 sensation. Patient had excellent response to facet injections in the past, done in 2010. He got 6 weeks of relief from the first and shorter relief from the second, so RFA was done, after which "he has some difficulties with spasms and the like. At this time, we would like to proceed with facet blocks or medial branch blocks again to see how he responds.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Left sided L4-L5 and L5-S1 facet injection:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 309. Decision based on Non-MTUS Citation Official Disability Guidelines, Low Back (acute and chronic)

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 300, 309. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back Chapter, Facet Joint Pain, Signs & Symptoms, Facet Joint Diagnostic Blocks (Injections), Facet Joint Medial Branch Blocks (Therapeutic).

**Decision rationale:** Regarding the request for facet injections, CA MTUS and ACOEM state that invasive techniques are of questionable merit, noting that facet neurotomies should be performed only after appropriate investigation involving controlled differential dorsal ramus medial branch diagnostic blocks. ODG states that suggested indicators of pain related to facet joint pathology include tenderness to palpation in the paravertebral area, a normal sensory examination, and absence of radicular findings. They also recommend the use of medial branch blocks over intraarticular facet joint injections as, "although it is suggested that MBBs and intra-articular blocks appear to provide comparable diagnostic information, the results of placebo-controlled trials of neurotomy found better predictive effect with diagnostic MBBs. In addition, the same nerves are tested with the MBB as are treated with the neurotomy." Furthermore, they note that therapeutic blocks are not recommended. Within the documentation available for review, the patient is noted to have radicular symptoms/findings including an abnormal sensory examination and the procedure does not appear to be diagnostic rather than therapeutic in nature. Furthermore, the request is for facet joint injections rather than the supported medial branch blocks and, unfortunately, there is no provision for modification of the current request. In light of the above issues, the currently requested facet injections are not medically necessary.