

Case Number:	CM14-0207410		
Date Assigned:	12/19/2014	Date of Injury:	10/31/2008
Decision Date:	02/17/2015	UR Denial Date:	12/01/2014
Priority:	Standard	Application Received:	12/11/2014

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 Neurology, has a subspecialty in Pain Medicine and is licensed to practice in Florida. 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:

11/4/14 note reports pain in the neck with spasm. There is muscle guarding over the lumbar paravertebral muscles. The pain is reported to be 5/10. There is moderate tenderness and spasm over the cervical paraspinal muscles. There is facet tenderness from C4 to C7. There is reported normal range of motion in the upper extremities and negative special shoulder tests. There is reported diffuse tenderness of the lumbar paraspinal muscles. There is positive right SI tenderness, Faber's sign, and SI thrust test. The strength is reported to be 5/5. The insured was recommended to continue medications and engage in at-home exercises and stretches as directed by PT.

IMR ISSUES, DECISIONS AND RATIONALES

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

Bilateral C4 through C6 medial branch block injection: Upheld

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) -neck, facet injection.

Decision rationale: The medical records provided for review report pain but do not document physical examination findings consistent with facet mediated pain. Further ODG guidelines do not support more than 2 facet levels injection in the case of an injured worker having demonstrated physical exam findings of facet mediated pain. The medical records provided for review do not demonstrate findings in support of C4 to C6 facet blocks congruent with ODG. Therefore, this request is not medically necessary.

Right Sacroiliac joint injection: Upheld

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, SI joint injection.

Decision rationale: The medical records provided for review do document the presence of at least 3 positive physical examination findings supportive of SI joint dysfunction but does not document the failure of at least 4-6 weeks of conservative treatment including PT or home exercises directed at the SI joint. ODG supports SI joint block with: 1. the history and physical should suggest the diagnosis (with documentation of at least 3 positive exam findings as listed above). 2. Diagnostic evaluation must first address any other possible pain generators. 3. The patient has had and failed at least 4-6 weeks of aggressive conservative therapy including PT, home exercise and medication management. As such the medical records provided for review do not support SI joint injection with plan of care congruent with ODG guidelines. Therefore, this request is not medically necessary.