

<b>Case Number:</b>	CM15-0138752		
<b>Date Assigned:</b>	07/28/2015	<b>Date of Injury:</b>	09/09/2002
<b>Decision Date:</b>	08/25/2015	<b>UR Denial Date:</b>	06/30/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/17/2015

### 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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: Massachusetts

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management

### 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 48-year-old male who sustained an industrial injury on 9/9/02. He had complaints of low back pain. The progress report dated 6/9/15 reports complaints of constant low back pain. He is able to work with pain medication use as needed. He has undergone epidural steroid injections and trigger point injections. The trigger point injections are most helpful for axial pain in the lumbosacral region. Currently his pain is rated 8/10. The worst pain is 10/10 and the least is 3/10. He has numbness and tingling in his lower extremities, left worse than the right. Norco relieves the pain and allows him to be more functional and able to tolerate work. Diagnoses include: chronic low back pain, lumbar radiculitis, myofascial pain and lumbar degenerative disc disease. Plan of care includes: refill norco, request trigger point injections in the bilateral lumbosacral paraspinal musculature a total of two, one for the left side and one for the right side. Work status: restricted to lifting no more than 10 pounds. Follow up in 4 weeks.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Two (2) trigger point injections, right and left side lumbosacral paraspinal musculature:**  
Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Trigger Point Injections.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Trigger point injections, Page(s): 122.

**Decision rationale:** The claimant has a remote history of a work injury occurring in September 2002 and continues to be treated for low back pain. Treatments have included epidural injections and trigger point injections. When seen, pain was rated at 8/10. He was having some lower extremity numbness and tingling. He was taking Norco up to three times per day. Physical examination findings included positive facet loading. There was right lower thoracic and bilateral lumbosacral paraspinal muscle tenderness. Straight leg raising was negative. There was decreased left lower extremity sensation. Authorization for repeat trigger point injections was requested. Criteria for a trigger point injection include documentation of the presence of a twitch response as well as referred pain. In this case, the presence of a twitch response with referred pain is not documented and the requested trigger point injection was not medically necessary. In terms of a repeat trigger point injection, criteria include documentation of greater than 50% pain relief with reduced medication use lasting for at least six weeks after a prior injection and there is documented evidence of functional improvement. The claimant's response to previous trigger point injections is not documented and the request is not medically necessary for this reason as well.