

Case Number:	CM15-0168603		
Date Assigned:	09/14/2015	Date of Injury:	03/08/2011
Decision Date:	10/13/2015	UR Denial Date:	08/25/2015
Priority:	Standard	Application Received:	08/27/2015

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: Arizona, California

Certification(s)/Specialty: Family Practice

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 37 year old male, who sustained an industrial-work injury on 3-8-11. A review of the medical records indicates that the injured worker is undergoing treatment for low back strain, post laminectomy syndrome, sciatica, lumbar spinal stenosis and chronic bilateral L5-S1 radiculopathy. Treatment to date has included pain medication including Norco, Dilaudid, Valium and Oxycontin, activity modification, physical therapy, acupuncture, epidural steroid injection (ESI) 6-17-11 and 2-9-14, lumbar laminectomy surgery in 2-8-2012, pain management, and other modalities. Medical records dated (3-2-15 to 8-14-15) indicate that the injured worker complains of constant low back pain that radiates to the bilateral lower extremities (BLE) with numbness and tingling. The medical record dated 7-9-15 the physician indicates that "the patient continues with full work duties, Norco has been helpful for him." The pain is rated 4 out of 10 on pain scale with medication and 8 out of 10 without medication. The medical record dated 8-14-15 the physician indicates that the epidural steroid injection (ESI) on 6-17-11 and 2-9-14 provided the injured worker with "greater than 50 percent pain relief for about 8 months." The physical exam dated 8-14-15 reveals that lumbar flexion is limited around 50 degrees, extension 10 degrees. There is sciatic notch tenderness present bilaterally, the straight leg raise is limited around 70 degrees bilaterally and is positive. Per the treating physician report dated 8-14-15 the employee has returned to work. The medical record dated 8-14-15 the physician indicates that the Magnetic resonance imaging (MRI) of the lumbar spine dated 3-31-11 reveals "disc protrusion at L3-4, L4-5 and L5-S1 worse to the left and central canal stenosis." The original Utilization review dated 8-25-15 non-certified a request for IV sedation for bilateral epidural steroid injection procedure as there was no documentation of significant concerns of the injured worker having anxiety or distress to support the use of IV sedation during the procedure.

IMR ISSUES, DECISIONS AND RATIONALES

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

IV sedation: Upheld

Claims Administrator guideline: Decision based on MTUS Low Back Complaints 2004, and Chronic Pain Medical Treatment 2009. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Treatment Index, 13th Edition (Web), 2015, Low Back chapter - Epidural steroid injections.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Epidural steroid injections (ESIs).

Decision rationale: In this case, the claimant does have radicular symptoms that correlate with imaging. Prior ESIs have provided substantial benefit. However, the standard practice is not to use sedation for the procedure. There is no indication that the claimant cannot cooperate or remain comfortably stable for the procedure. There are other options for reducing anxiety for a procedure. As a result, the request for the IV sedation is not medically necessary.