

<b>Case Number:</b>	CM15-0199042		
<b>Date Assigned:</b>	10/14/2015	<b>Date of Injury:</b>	06/08/2015
<b>Decision Date:</b>	11/20/2015	<b>UR Denial Date:</b>	09/24/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/09/2015

### 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 57 year old female who sustained an industrial injury on June 08, 2015. Recent primary visit dated September 17, 2015 reported subjective complaint of: new onset of symptoms to 3rd interspace right with noted burning and shooting pains to the area of third interspace that travels. The plan of care noted application of final soft case #6, patient needs a trigger point injection. The following diagnosis was added to the treating diagnoses: lesion of plantar nerve. Primary treating visit dated September 08, 2015 reported subjective complaint of "continued improvement at right fracture site." Objective assessment noted: decreased edema, decreased pain to fracture site. The patient was diagnosed with; closed fracture of left fifth metatarsal. The plan of care noted: applied 5th of 6th planned soft casts for edema and stability and increase weight bearing. Primary follow up dated July 28, 2015 reported subjective complaint of "continued swelling and pain to left foot and believes she has a broken foot." The plan of care noted: prescribing Zaleplon and Norco with recommendation for soft cast placement. On September 18, 2015 a request was made for trigger point injection to third interspace foot that was noncertified by Utilization review on September 24, 2015.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Trigger Point Injection to third inter space foot: Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Trigger point injections.

**MAXIMUS guideline:** Decision based on MTUS Ankle and Foot Complaints 2004, Section(s): Summary. Decision based on Non-MTUS Citation Trigger Points: Diagnosis and Management, David J. Alvarez, D.O., and Pamela G. Rockwell, D.O., University of Michigan Medical School, Ann Arbor, Michigan February 15, 2002 / volume 65, number 4 pg 650-660.

**Decision rationale:** Steroid injections are recommended by the guidelines for Morton's neuroma, plantar fasciitis and heel Spurs. In this case, the request was for trigger injections. In general the MTUS guidelines do not support trigger injections due to their short-term benefit as noted in the low back section, they are not particularly addressed for the foot in the ACOEM guidelines. According to the referenced literature, it may be beneficial for any trigger point identified in the body. In this case, the claimant had a fracture with subsequent swelling and callous formation. There is was no mention of myofascial trigger points. The solution to be used for the injection was not specified. The request is not medically necessary.