

<b>Case Number:</b>	CM15-0205364		
<b>Date Assigned:</b>	10/22/2015	<b>Date of Injury:</b>	01/07/2000
<b>Decision Date:</b>	12/10/2015	<b>UR Denial Date:</b>	09/30/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/20/2015

### 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: California, Hawaii

Certification(s)/Specialty: Physical Medicine & Rehabilitation

### 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 72 year old male sustained an industrial injury on 1-7-00. Documentation indicated that the injured worker was receiving treatment for chronic low back pain with lumbar degenerative disc disease. Recent treatment consisted of sacroiliac joint trigger point injections, injections, physical therapy and medications. In a PR-2 dated 9-17-15, the injured worker complained of persistent constant low back pain with radiation to bilateral lower extremities, right greater than left. The injured worker reported that recent sacroiliac joint trigger point injections (7-27-15) only lasted a couple of days. The injured worker wanted to proceed with surgery. Physical exam was remarkable for lumbar spine with tenderness to palpation to bilateral sacroiliac regions, normal lumbar range of motion in flexion and extension, negative straight leg raise, 5 out of 5 lower extremity strength, normal deep tendon reflexes and intact sensation throughout. The physician documented that open magnetic resonance imaging of the lumbar spine (8-19-15) showed minimal degenerative disc disease at L3-4 and L4-5 with facet arthropathy. The physician recommended right L3-4 and L4-5 facet injections. On 9-30-15, Utilization Review noncertified a request for a right facet injection at L3-4 and L4-5.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Right facet injection at L3-L4 and L4-L5: 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 ODG, Low Back - Lumbar & Thoracic chapter, Facet joint diagnostic blocks (injections).

**Decision rationale:** The patient presents with persistent constant low back pain with radiation to the bilateral lower extremities, right greater than left. The current request is for right facet injection at L3-L4 and L4-L5. The treating physician states, in a report dated 09/17/15, "We will request authorization for a right L3-L4, L4-L5 facet injection with [REDACTED] (36B) The MTUS is silent on facet injections. ODG guidelines state, "There should be no evidence of radicular pain, spinal stenosis, or previous fusion" and "Diagnostic facet blocks should not be performed in patients in whom a surgical procedure is anticipated." An MRI dated 08/19/15 shows "minimal degenerative disc disease L3-L4, L4-L5 with facet arthropathy." (36B) In this case, the treating physician, based on the records available for review, notes the patient "continues to have constant low back pain that radiates into bilateral lower extremities, right greater. He reports that the injection only lasted a couple of days. He would like to proceed with surgery." (34B) surgical candidates presenting with radicular symptoms are not eligible for facet injections per the guidelines. The current request is not medically necessary.