

<b>Case Number:</b>	CM15-0051460		
<b>Date Assigned:</b>	03/24/2015	<b>Date of Injury:</b>	11/28/2001
<b>Decision Date:</b>	05/04/2015	<b>UR Denial Date:</b>	02/16/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/18/2015

### 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: Texas, Florida

Certification(s)/Specialty: Anesthesiology, 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 56 year old male, who sustained a work/ industrial injury on 11/28/01. He has reported initial symptoms of back pain. The injured worker was diagnosed as having lumbar spondylosis without myelopathy. Treatments to date included medication, surgery (fusion at L5-S1 level in 2006), left facet block, physical therapy, massage therapy, chiropractic care and injection. Magnetic Resonance Imaging (MRI) of the lumbar spine on 11/1/14 reported mild facet osteoarthritis with mild foraminal narrowing at the L3-4 level, shallow central disc protrusion and disc bulge eccentric to the left versus left foraminal and extraforaminal protrusion with mild facet osteoarthritis , previous anterior discectomy and fusion with mild bilateral foraminal narrowing at the L5-S1 levels. Currently, the injured worker complains of chronic low back pain rated 4/10 and left foot pain with tingling and hyperhidrosis of the right foot. The treating physician's report (PR-2) from 2/3/15 indicated there was also report of stress and anxiety due to chronic issues. Medications included Celebrex, Lansorazole, Viagra, Norco, Celebrex, Skelaxin, Trazodone, Diazepam, Alprozolam, Zolpidem, Hydrocodone/APAP along with Nuvigil, Opana, AndroGel, Diovan, and Metoprolol. Treatment plan included Medical branch blocks under fluoroscopic guidance bilateral L4 L5 S1.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Medical branch blocks under fluoroscopic guidance bilateral L4 L5 S1, quantity: 6,:**  
Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 301. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Treatment Index, 11th Edition (web) 2014, Low Back, Facet joint diagnostic blocks (injections).

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303-304, Chronic Pain Treatment Guidelines 9792.23.5 Page(s): 46. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain Chapter Low and Upper Back.

**Decision rationale:** The CA MTUS and the ODG guidelines recommend that facet procedures can be utilized in the treatment of non radicular low back pain when conservative treatments with medications and PT have failed. The records indicate a prior history of lumbar spine fusion as well as subjective and objective findings indicative of radicular low back pain. The back pain is therefore radicular and did not meet the guidelines criteria. The guidelines recommend that a maximum of 3 level facet procedures be performed at each setting so that efficacy can be evaluated before further procedures. The criteria for fluoroscopic guided bilateral L4, L5 and S1 facet median branch blocks #6 was not met.