

<b>Case Number:</b>	CM15-0060294		
<b>Date Assigned:</b>	04/06/2015	<b>Date of Injury:</b>	03/18/1982
<b>Decision Date:</b>	05/05/2015	<b>UR Denial Date:</b>	03/12/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/30/2015

### 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  
 Certification(s)/Specialty: Emergency Medicine

### 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 an industrial injury on March 18, 1982. He has reported pain of the thoracic spine and has been diagnosed with shoulder joint pain, lumbago, partial quadraplegic, spasms, Brown-Sequard Syndrome, chronic pain syndrome, and thoracic pain. Treatment has included medications, an intrathecal baclofen pump, trigger point injections, and physical therapy. Currently the injured worker reports pain to the thoracic spine with radiation to the left flank and chest. Pain has been chronic. Objective exam of his baseline partial hemiplegia is at baseline. Pt has documented diffuse thoracic pain with taut bands on latissimus dorsi muscles. Report from 10/6/14 reports that trigger point injection denied by utilization review. Note from 1/20/15 does not document any trigger point or any injections that was done. Request for trigger point injection was requested from progress note dated 3/2/15. Patient reportedly received "several" trigger point injection and sacroiliac joint injection in "January 2015" that "helped alot" and is requested another series of injections. The treatment request included trigger point injections.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Trigger point injections x 6:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Trigger Point Injections Page(s): 121-122.

**Decision rationale:** As per MTUS Chronic pain Guidelines, Trigger Point Injections are recommended only for myofascial pain syndrome and is not recommended for radicular pain. As per MTUS guidelines, multiple criteria must be met before TPI can be recommended. It requires documentation of circumscribed trigger points with evidence upon palpation of a twitch response as well as referred pain. Providers have consistent failed to document any actual trigger points. Another criteria failed is that no repeat injections unless a greater than 50% pain relief is obtained for six weeks after an injection and there is documented evidence of functional improvement. Patient has claim of subjective improvement after claimed injection with no documentation of any objective improvement in pain or function. Documentation provides not information concerning who performed the claimed trigger point injections. Multiple Utilization Reviews has denied and rejected request for TPI so it is unclear who performed the procedure and who approved it. No procedural or operative notes were provided for review. Due to failure of multiple criteria and unclear procedure that the patient claimed to have received, the provided documentation fails to support trigger point injections. Therefore, the request is not medically necessary.