

<b>Case Number:</b>	CM15-0240308		
<b>Date Assigned:</b>	12/17/2015	<b>Date of Injury:</b>	02/01/2014
<b>Decision Date:</b>	01/22/2016	<b>UR Denial Date:</b>	11/25/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	12/09/2015

### 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: Massachusetts

Certification(s)/Specialty: Physical Medicine & Rehabilitation, 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:

This injured worker (IW) is a 51 year old female with a date of injury 2-1-14. The IW complained of a right sided headache. Diagnosis included cervical strain. Past diagnostics have included an MRI of the cervical spine in May 2014. Prior treatments have included pain medications, Myofascial release x6 and trigger injections to the cervical region. The chiropractic progress note dated 10-26-15 indicated this is the IW's 6 out of 6 visit that is being provided. The IW's Initial visit complaints were headaches, suboccipital and neck pain, right eyelid droop and occasional radicular symptoms of the left arm to the 3rd and 4th digits. The IW pain at the first visit was between a 3-7 out of 10 and was somewhat relieved with the steroid injections and the massage. The final visit complaints indicated the IW revealed the myofascial treatments give her moderate relief from the neck tension and headaches, that lasts for about 3 days, and then her pain returns to her baseline. Her pain levels remain the same, though after treatment the levels are in the lower end of the range. The IW indicated she would like to continue with treatment. This physician opinion is additional myofascial treatment may be somewhat helpful, but would not give any lasting benefit. It is difficult to say whether this IW would benefit from chiropractic care at this point in her injury. The physician note dated 11-16-15 indicated the IW continued to complain of neck pain and muscular tightness with debilitating headaches. The IW indicated the headache radiated along the right side of her head into her face and included pain behind or around the eye. Unfortunately, a request for an occipital nerve block was denied. Trigger point injections have been effective in the past. The IW indicated she takes Flexeril for muscle spasms, as well as Naproxen occasionally, and when her pain is significantly severe and flared up as it is

currently, she will take half a Norco, but she has not received this medication in some time. Other medications include Medrox Ointment, Omeprazole and Diazepam. Physical exam revealed cervical stiffness and pain with cervical rigidity and spasm, twitch response was present. Diagnoses included headache with cervical spondylosis without myelopathy, cervical root lesions, not elsewhere classified, other spondylosis, cervical region and cervicalgia. The IW is requesting a repeat cervical trigger point injection, since other interventional requests have been denied and these have helped her before. The IW had reduced pain and better range of motion after previous injections. The IW is requesting additional myofascial release therapy, since this has helped her functionally as well. The IW should continue her authorized acupuncture sessions. A trigger point injection was given at this visit. The physician request on 11-16-15 is for additional Myofascial release, x 6 sessions. Utilization Review non-certified this request on 11-25-15.

### **IMR ISSUES, DECISIONS AND RATIONALES**

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

**Myofascial release, an additional six sessions:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Manual therapy & manipulation, Massage therapy.

**Decision rationale:** The claimant sustained a work injury in February 2014 as the result of a near fall and is being treated for chronic neck pain and headaches. In October 2015, she was receiving treatments including heat and manual therapy. When seen in November 2015, she had just started her first acupuncture sessions. Between driving and what she felt was a non-relaxing environment, the treatment had not provided significant benefit. She was having ongoing neck pain and muscle tightness and debilitating headaches. Physical examination findings included limited and painful cervical range of motion with stiffness. There was cervical rigidity with spasms and tenderness and trigger points. Tinel's testing over the right occipital nerve region produced increasing right sided headache symptoms. A trigger point injection was performed. Authorization for additional myofascial release treatment was requested. Massage therapy is recommended as an option. It should be an adjunct to other recommended treatments such as exercise. Guidelines recommend that it should be limited to 4-6 visits in most cases. In this case the claimant has myofascial release treatments less than one month before. The number of additional treatment sessions is in excess of guideline recommendations. There is no evidence of an adjunctive rehabilitation program. The request is not medically necessary.