

Case Number:	CM13-0014380		
Date Assigned:	09/30/2013	Date of Injury:	06/13/2010
Decision Date:	02/19/2014	UR Denial Date:	08/14/2013
Priority:	Standard	Application Received:	08/20/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Addiction and Toxic, has a subspecialty in Pediatrics and is licensed to practice in Maryland and New York. 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 physician 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/services.

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 female patient has a date of injury on 6/13/10. The patient is complaining of chronic low back pain. Her radiologic diagnosis includes disc pathology at L5-S1 and cervical spine disc bulging at C6-7. The patient also has right sided weakness and abnormal nerve conduction study of the nerves L5 - S1. The treatment in dispute is trigger point injection.

IMR ISSUES, DECISIONS AND RATIONALES

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

Trigger Point Injections: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 79-80. Decision based on Non-MTUS Citation Staal JB, de Bie RA, de Vet HC, Hildebrandt J, Nelemans P. Injection therapy for sub acute and chronic low back pain: an updated Cochrane review. Spine (Philadelphia PA 1976)

Decision rationale: Recommended only for myofascial pain syndrome as indicated below, with limited lasting value. Not recommended for radicular pain. A trigger point is a discrete focal tenderness located in a palpable taut band of skeletal muscle, which produces a local twitch in response to stimulus to the band. As per the nerve conduction study it is possible that patient has radiculopathy. Staal JB, de Bie RA, in their Cochrane review has noted that injection therapy

(including Trigger point, the results indicated that there is no strong evidence for or against the use of any type of injection therapy. Therefore this treatment is not medically necessary.