

<b>Case Number:</b>	CM14-0127774		
<b>Date Assigned:</b>	08/15/2014	<b>Date of Injury:</b>	04/11/2011
<b>Decision Date:</b>	09/29/2014	<b>UR Denial Date:</b>	07/30/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/12/2014

### 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. The expert reviewer is Board Certified in Physical Medicine and Rehabilitation, has a subspecialty in Pain Medicine and is licensed to practice in Texas and Oklahoma. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

### 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 48-year-old female who reported an injury of unknown mechanism on 04/11/2011. On 03/06/2014, her diagnoses included lumbar disc displacement without myelopathy and pain in joint, pelvis/thigh. An MRI of the left hip on 10/16/2013 revealed that the anterior labrum was diminutive. There were no other definite labral tears seen on the MRI. There was insertional tendinopathy of the right gluteus medius and minimus. Her complaints included left hip pain. On examination there was tenderness at the greater trochanter. She had attended an unknown number of physical therapy sessions, and was noted to have only 3 left to complete her course of therapy. The treatment plan stated that after completing her physical therapy, she may need an SI joint injection, but she was concerned because she had diabetes. In general, corticosteroid use is contraindicated with patients with a diagnosis of diabetes. The note further stated that if physical therapy or injections did not help, she may have required left hip diagnostic arthroscopy. There was no request for authorization included in this worker's chart.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Iliopsoas tendon injection under ultrasound:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation article by Masala et al in Seminar of Interventional Radiology, June 2010, and on clinical practice norms.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004), Hip and Groin Disorders - Hip Osteoarthritis, Intraarticular glucocorticosteroid injections.

**Decision rationale:** The request for iliopsoas tendon injection under ultrasound is not medically necessary. The CA MTUS/ACOEM Guidelines note that there are several types of injections that have been used for patients with hip pain. These include intra-articular, glucocorticosteroid injections, Viscosupplementation, prolotherapy, and botulinum injections. There is some evidence to suggest steroid injections may be superior to hyaluronic acid injections. Hip injections may require ultrasound or fluoroscopy as there are no quality trials of blind injections and all quality trials have utilized them. This request did not specify the type of injection that was to have been given in this worker's hip. The clinical information submitted failed to meet the evidence-based guidelines for hip injections. Therefore, this request for iliopsoas tendon injection under ultrasound is not medically necessary.