

Case Number:	CM14-0141284		
Date Assigned:	09/10/2014	Date of Injury:	11/19/2004
Decision Date:	10/10/2014	UR Denial Date:	08/25/2014
Priority:	Standard	Application Received:	09/02/2014

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 and is licensed to practice in Illinois. 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 64 year old male who reported an injury on 11/19/2004 with an unknown mechanism of injury. The injured worker was diagnosed with headaches. The injured worker was treated with medications and trigger point injections. The medical records did not indicate diagnostic studies. The injured worker had trigger point injections on 01/15/2014, 03/24/2014, 05/05/2014, 06/016/2014, and 07/28/2014. The medical records did not address the injured workers complaints or functional deficits. On the procedure note dated 07/28/2014, the injured worker was noted to be prescribed soma. The treatment plan was for trigger point injections to the neck x4. The rationale for the request was not indicated. The request for authorization was submitted for review on 08/11/2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Trigger Point Injections to the neck x 4: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Trigger point injections Page(s): 122.

Decision rationale: The request for trigger point injections to the neck x4 is not medically necessary. The injured worker is diagnosed with headaches. The California MTUS guidelines note trigger point injections with a local anesthetic may be recommended for the treatment of chronic low back or neck pain with myofascial pain syndrome. The guidelines noted there must be documentation of circumscribed trigger points with evidence upon palpation of a twitch response as well as referred pain and injured workers should have symptoms which have persisted for more than three months. There should be evidence that medical management therapies such as ongoing stretching exercises, physical therapy, NSAIDs and muscle relaxants have failed to control the injured workers pain and radiculopathy must not be present (by exam, imaging, or neuro-testing). The guidelines recommend no more than 3-4 injections per session should be administered. The guidelines note no repeat injections should be given without evidence of greater than 50% pain relief obtained for six weeks after the prior injection and there is documented evidence of functional improvement. Injections should not be given at an interval of less than two months. There is a lack of documentation of circumscribed trigger points with evidence upon palpation of a twitch response as well as referred pain. There is a lack of documentation indicating how long the symptoms have been present and documentation indicating other therapies have failed to control pain. There is a lack of documentation indicating that radiculopathy is not present by exam, imaging, or neuro-testing. There is also a lack of documentation indicating the injured worker had greater than 50% pain relief for six weeks after an injection with documented evidence of functional improvement. As such, the request for trigger point to the neck x4 is not medically necessary.