

Case Number:	CM14-0150934		
Date Assigned:	09/19/2014	Date of Injury:	01/16/2014
Decision Date:	10/20/2014	UR Denial Date:	09/05/2014
Priority:	Standard	Application Received:	09/16/2014

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 Neuromuscular Medicine and is licensed to practice in Maryland. 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 patient is a 50 year old female with a work injury dated 1/16/14. The diagnoses include lumbar facet arthropathy, lumbar spinal stenosis, and lumbar disc displacement. Under consideration is a request for lumbar epidural steroid injection #2. There is a primary treating physician report dated 8/27/14 that reveals the pain level is VAS 7/10. She continues to complain of pain radiating down to left foot with numbness and tingling in left foot. Also complains of several short episode of sharp pain in right thigh. The lumbar spine exam revealed that the patient exhibits decreased range of motion, tenderness and pain. She exhibits no bony tenderness, no swelling, no edema, no deformity, no laceration, no spasm and normal pulse. She has a normal Straight Leg Raise Test. Gait abnormal. Per documentation the patient is status post a lumbar epidural steroid injection on June 26, 2014. Per documentation a report dated July 16, 2014 indicates 7/10 pain radiating to the left foot with numbness and tingling in the left foot. She is continued on Norco, Trazodone for insomnia, Tylenol, and is prescribed nortriptyline. Work restrictions are completely unchanged from the report on May 01, 2014. An MRI dated 3/20/14 revealed: 1. Diffuse disc bulge of 3-4 mm at the L3-4 and L4-5 disc levels with impingement of the L4 nerve roots bilaterally. 2. Diffuse disc bulge 2-3 mm at the L1-2 and L2-3 Disc levels with narrowing of the neural foramina bilaterally 3. Degenerative changes of the facet joints at L1-2, L2-3, L3-4, L4-5 and L5-S1 disc levels. 4. Degenerative disc disease at the L1-2, L2-3, L3-4 and L4-5 disc levels. 5. Straightening of the lumbar spine suggestive of spasm. 6. Spondylosis of the lumbar spine. 7. Desiccated disc at the L5-S 1 disc level.

IMR ISSUES, DECISIONS AND RATIONALES

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

Lumbar epidural steroid injection #2: 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 Epidural steroid injections (ESIs) Page(s): 46.

Decision rationale: Lumbar epidural steroid #2 is not medically indicated per the MTUS Chronic Pain Medical Treatment. The documentation submitted does not reveal that the patient has had continued objective documented pain and functional improvement, including at least 50% pain relief with associated reduction of medication use for six to eight weeks from the prior injection, therefore the request for another lumbar epidural steroid injection is not medically necessary. Additionally, the request as written does not indicate laterality or level of injection. Therefore, the request for Lumbar epidural steroid injection #2 is not medically necessary and appropriate.