

<b>Case Number:</b>	CM15-0012994		
<b>Date Assigned:</b>	01/30/2015	<b>Date of Injury:</b>	11/11/2013
<b>Decision Date:</b>	03/19/2015	<b>UR Denial Date:</b>	01/09/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/22/2015

### 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: Texas, Ohio, California

Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

### 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 was a 38 year old male, who sustained an industrial injury, November 11, 2013. The injured was sustained while using a floor cleaner, the machine was stuck and the injured worker pulled to free the machine. The injured worker felt pain in the neck and pain with numbness down the right arm and hand. The injured worker was diagnosed with displacement of cervical intervertebral disc without myelopathy and degenerative cervical intervertebral disc and C5-C6 severe right foraminal stenosis secondary to a broad-based central disc extrusion as seen on MRI of the cervical spine, on November 22, 2013. According to the operative report of January 29, 2015, the injured worker received an epidural steroid injection to the medial part of the C5-C6 transverse process under fluoroscopy. The injured worker previously received the following treatments Norco, worker modifications, Anaprox, MRI of the cervical spine, laboratory studies, chiropractic services, physical therapy and January 29, 2015, an epidural steroid injection to the medial part of the C5-C6 transverse process. According to progress note of November 11, 2014, the injured workers chief complaint was of neck and right arm pain and numbness. The physical exam noted right upper extremity with slight hypoesthesia in the C6 distribution and C5 distribution of the right upper extremity to light touch and on prick. There was absent biceps reflex on the right as compared to the left, which was 1+. The injured worker has not responded to conservative treatment. The injured worker had diffuse tenderness and pain on rotation of the cervical spine to the right. There was full range of motion to the cervical neck. On November 11, 2014, the primary treating physician requested 1 trial of 3 cervical epidural injections at the C5-6 level with a cervical branch block at that level for both diagnostic

and therapeutic purposes. On January 9, 2015, the utilization review denied authorization for 1 trial of 3 cervical epidural injections at the C5-6 level with a cervical branch block at that level. The request was modified to 1 trial of 1 cervical epidural injection at the C5-6 level. The utilization Reviewer referenced MTUS/ACOEM and ODG guidelines for the decision.

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

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

**1 trial of 3 cervical epidural injections at the C6-6 level with a cervical branch block at that level:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 174, Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation The Official Disability Guidelines, Neck and Upper Back (Acute & Chronic)

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Epidural steroid injections (ESIs) Page(s): Chronic Pain Medical Treatment Guidelines 8 C.C.R. .

**Decision rationale:** The applicant is a represented [REDACTED] beneficiary who has filed a claim for chronic neck pain reportedly associated with an industrial injury of November 11, 2013. In a Utilization Review Report dated January 9, 2013, the claims administrator partially approve a request for a series of three cervical epidural steroid injections with an associated cervical branch block as a trial of one cervical epidural steroid injection at the C5-C6 level. The claims administrator referenced a December 14, 2014 progress note in its determination. The applicant's attorney subsequently appealed. In a progress note dated January 29, 2015, the applicant reported ongoing complaints of neck pain with associated numbness about the right arm and right hand. The applicant had MRI-confirmed severe C5-C6 neuroforaminal stenosis, it was acknowledged. The applicant was not working. The applicant was using tramadol for pain relief, it was acknowledged. A C6-C7 epidural steroid injection was apparently performed. No, the request for three cervical epidural steroid injections with a cervical branch block was not medically necessary, medically appropriate, or indicated here. As noted on page 46 of the MTUS Chronic Pain Medical Treatment Guidelines, current clinical evidence does not support a series of three epidural injections in either the diagnostic or therapeutic phase of treatment. The request for three consecutive epidural injections, thus, runs counter to MTUS principles and parameters as page 46 of the MTUS Chronic Pain Medical Treatment Guidelines stipulates that pursuit of repeat epidural blocks should be based on evidence of lasting analgesia and functional improvement from earlier blocks. Therefore, the request was not medically necessary. MTUS Chronic Pain Medical Treatment Guidelines, page 46, Epidural Steroid Injections topic.