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| <b>Case Number:</b>   | CM15-0066228 |                              |            |
| <b>Date Assigned:</b> | 04/14/2015   | <b>Date of Injury:</b>       | 08/05/2013 |
| <b>Decision Date:</b> | 05/12/2015   | <b>UR Denial Date:</b>       | 03/27/2015 |
| <b>Priority:</b>      | Standard     | <b>Application Received:</b> | 04/07/2015 |

### 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: Massachusetts

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management

### 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 42 year old male, who sustained an industrial injury on 8/5/13. He reported a low back injury. The injured worker was diagnosed as having lumbosacral neuritis, myalgia and myositis, low back pain, bilateral L5 radiculopathy, myofascial dysfunction with trigger points in lumbar paravertebral muscles and quadratus lumborum muscles, lumbar disc displacements at multiple levels and (MRI) magnetic resonance imaging evidence for extruded disc abutting the right L5 nerve root. Treatment to date has included lumbar episteroidal injection, physical therapy, home exercise program and oral medications including opioids. Currently, the injured worker complains of low back pain 1-2/10 with radiation to lower right extremity. Documentation notes the injured worker received significant benefit from epidural steroid injections in the past. Upon physical exam, tenderness is noted over the sciatic notch with trigger points in lumbar paravertebral muscles and quadratus lumborum muscles and diminished lumbar spine range of motion. The treatment plan consisted of request for epidural steroid injection and follow op appointment.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**L5/S1 epidural steroid injection:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Epidural Steroid Injection.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Criteria for the use of Epidural steroid injections Page(s): 46.

**Decision rationale:** The claimant sustained a work injury in August 2013 and continues to be treated for low back and radiating leg pain. Prior treatments have included an epidural injection, which was done in combination with trigger point injections on 08/19/14. When seen, he was having back pain radiating into the right lower extremity. He was taking less Norco and pain was rated at a constant 1-2/10. He was continuing to work without restrictions. Physical examination findings included decreased right lower extremity sensation with positive straight leg raising bilaterally. An MRI of the lumbar spine had shown findings of an L4-5 right lateralized disc extrusion affecting the right L5 nerve root. Guidelines recommend that, when in the therapeutic phase, repeat epidural steroid injections should be based on documented pain relief with functional improvement lasting for at least six to eight weeks, with a general recommendation of no more than 4 blocks per region per year. In this case, however, the claimant has low pain levels and is decreasing his medication usage. He continues to work without restrictions. A repeat lumbar epidural steroid injection was not medically necessary at the time of the request.