

## **IRO REVIEWER REPORT**

**DATE OF REVIEW:** 02/21/07

**IRO CASE NO.:**

**DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:**

Preauthorization denial trigger point injections three of more (20553), fluoroscopy (76005), MAC anesthesia (01992).

**A DESCRIPTION OF THE QUALIFICATIONS FOR EACH PHYSICIAN OR OTHER HEALTH CARE PROVIDER WHO REVIEWED THIS DECISION:**

Texas License and currently listed on TDI DWC ADL  
Board Certified in Physical Medicine  
Board Certified in Pain Management  
Board Certified in Anesthesiology.

**REVIEW OUTCOME:**

Upon independent review, the reviewer finds that the previous adverse determination/adverse determinations should be:

Partially overturned.

Overturned – Denied trigger point injections (20553) are appropriate.

Upheld – Denial of fluoroscopic guidance (76005), and  
MAC anesthesia (01992)

**INFORMATION PROVIDED TO THE IRO FOR REVIEW:**

1. – Notice of injury.
2. 12/24/04 – CT scan/C spine 3 view.
3. 12/29/04 –CT scan.
4. 01/14/05 –Emergency room records.
5. 02/03/05 –System – Cervical spine series/CT head.

6. 02/18/05 –Systgem – MRI Brain
7. 03/23/05 –Hospital – MRI cervical spine.
8. 04/01/05–07/13/05 –, daily notes.
9. 08/17/05 – Nerve conduction studies
10. 09/02/05 –.
11. 09/21/05 –Hospital, trigger point injections.
12. 10/05/05 –, left sided cervical facet joint block.
13. 08/23/06 – Dr.Diagnosis 1) left sided cervical radiculitis, 2) cervicalgia, 3) radicular pain.
14. 11/06/06 – Dr. office notes.
15. 01/09/07-01/22/07 – Company adverse determination.
16. 01/22/07 – Letter of reconsideration.
17. 01/23/07 –M.D., letter.
18. 02/06/07 – Multiple pages TDI request IRO.

### **PATIENT CLINICAL HISTORY (SUMMARY):**

I have reviewed the entire medical records submitted.

The employee is currently under the care of Dr. who has requested trigger point injections. The employee apparently has symptoms consistent with myofascial pain, with complaints of neck and shoulder pain with an impression of cervical strain, left trapezius spasm without radiculopathy and carpal tunnel syndrome.

The employee was seen for an independent examination by Dr. on 01/23/07, who did recommend trigger point injections. It was Dr.'s opinion that the current complaints were related to the compensable injury, which has not yet resolved.

### **ANALYSIS AND EXPLANATION OF THE DECISION INCLUDE CLINICAL BASIS, FINDINGS, AND CONCLUSIONS USED TO SUPPORT THE DECISION:**

The trigger point injections have been denied. However, I would agree with Dr. that trigger point injections are appropriate and are consistent with spine treatment guidelines such as *Official Disability Guidelines* and *ACOEM Guidelines*. However, there was no indication for fluoroscopic guidance or general sedation with MAC. Trigger point injections are relatively simple to perform, can be performed as an outpatient without the need for sedation or fluoroscopic guidance, especially when involving the trapezius areas. This is a relatively minor procedure which can be done in a relatively pain free condition. I see no indication for the use of fluoroscopic guidance or for general sedation for this type of condition.

Therefore, trigger point injections are appropriate to perform given the current condition as described by Dr. are overturned. However, the denials for CPT Code 76005 (Fluoroscopy) and 01992 (MAC anesthesia) are upheld.

**A DESCRIPTION AND THE SOURCE OF THE SCREENING CRITERIA OR OTHER CLINICAL BASIS USED TO MAKE THE DECISION:**

*Official Disability Guidelines*  
*ACOEM Guidelines*