



Southwestern Forensic
Associates, Inc.

Amended May 8, 2008

REVIEWER'S REPORT

DATE OF REVIEW: 05/07/08

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Lumbar epidural steroid injection.

DESCRIPTION OF QUALIFICATIONS OF REVIEWER:

D.C., D.O., M.S., Board Certified in Chiropractic, Physical Medicine and Rehabilitation,
Pain Management

REVIEW OUTCOME:

“Upon independent review, I find that the previous adverse determination or determinations should be (check only one):

Upheld (Agree)

Overturned (Disagree)

Partially Overturned (Agree in part/Disagree in part)

INFORMATION PROVIDED FOR REVIEW:

1. I have reviewed the request for an epidural steroid injection by Dr..
2. I reviewed a note listed as an initial evaluation dated 08/20/07, which was authored by Dr. chiropractor. Diagnosis was lumbar strain/sprain, right SI joint dysfunction, and right knee contusion.
3. I reviewed an MRI scan report of 11/07/07 of the lumbar spine, which reads, “Discomfort pathology is seen at the L4/L5 level was described.” This was offered by Dr. The pathology that he has identified is that of a 2- mm to 3-mm discomfort protrusion/herniation.
4. I reviewed x-rays of the lumbar spine read by Dr. on 11/07/07, which showed no abnormalities.
5. I reviewed a note from Dr. dated 02/29/08. At that time she was complaining of lower back pain after she had fallen on both of her knees. She states the pain in her low back was 10/10 and radiates into both legs. He does not say where on the legs that it radiates to. He states she is happy with her condition of her lower back, but I believe that may be a typographical error. Even though her pain was 10/10, she was taking no medications.

Strength, sensation, and reflexes were normal in both upper and lower extremities with limited mobility in the lumbar spine and negative straight leg raising with spasms in the lower back. Even though her neurological exam was completely normal, he opines that she has lumbar radiculitis.

6. I reviewed a report of Dr. dated 03/05/08.

7. I reviewed a report from Dr. dated 04/04/08.

INJURED EMPLOYEE CLINICAL HISTORY (Summary):

It appears as though the injured employee fell on her knees at work. She apparently had undergone chiropractic treatment. She had an MRI scan showing a discomfort protrusion at L4/L5. She had a recent clinical exam that did not support radiculopathy. She had a normal neurologic exam and negative straight leg raising sign. Her pain level was 10/10, and she was on no medication.

ANALYSIS AND EXPLANATION OF THE DECISION, INCLUDING CLINICAL BASIS, FINDINGS AND CONCLUSIONS USED TO SUPPORT DECISION:

Epidural steroid injections are appropriate in a series of up to two injections for acute low back and associated with radicular complaints and supported clinically as a radiculopathy. There is no confirmation of a radiculopathy. The MRI scan does not show any compressive neurological disorder. The neurological exam was normal. Straight leg raise was negative. Without confirmation of radiculopathy, epidural steroid injections are not supported, in my opinion.

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

(Check any of the following that were used in the course of your review.)

- _____ACOEM-American College of Occupational & Environmental Medicine UM Knowledgebase.
- _____AHCPR-Agency for Healthcare Research & Quality Guidelines.
- _____DWC-Division of Workers' Compensation Policies or Guidelines.
- _____European Guidelines for Management of Chronic Low Back Pain.
- _____Interqual Criteria.
- _____X _____Medical judgment, clinical experience and expertise in accordance with accepted medical standards.
- _____Mercy Center Consensus Conference Guidelines.
- _____Milliman Care Guidelines.
- _____X _____ODG-Official Disability Guidelines & Treatment Guidelines.
- _____Pressley Reed, The Medical Disability Advisor.
- _____Texas Guidelines for Chiropractic Quality Assurance & Practice Parameters.
- _____Texas TACADA Guidelines.
- _____TMF Screening Criteria Manual.
- _____Peer reviewed national accepted medical literature (provide a description).
- _____Other evidence-based, scientifically valid, outcome-focused guidelines (provide a description.)