



Southwestern Forensic
Associates, Inc.

DATE OF REVIEW: 09/07/08

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Lumbar medial branch blocks.

DESCRIPTION OF QUALIFICATIONS OF REVIEWER:

D.C., D.O., M.S., Board Certified in Chiropractic, Physical Medicine and Rehabilitation,
and 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 reviewed a report from Dr. dated 03/12/08.
2. I reviewed a report from Dr. dated 08/05/08.
3. I reviewed a report dated 08/08/08 from Dr. He indicated that the last procedure performed on 07/11/08 relieved most of his pain. He is having pain in the lower back with no radiation to the legs. Apparently he had undergone trigger point injections in the paravertebral muscles of the lumbar spine on 06/17/08 and right lumbar medial branch blocks from L1 to S1 on 07/11/08. On that particular date of examination, he had an exaggerated lumbar lordosis with moderately restricted range of motion due to pain with tenderness over the lower back including the facet joints with apparent muscle spasms noted. He was diagnosed with lumbar facet dysfunction.
4. I reviewed a 07/01/08 note from Dr. with the examination the same. In fact, it appears as though the lumbar spine examination was cut and pasted, as it is exactly word-for-word as the previously mentioned exam.
5. I reviewed a 06/11/08 note from Dr. . The note indicated that he was sitting in his chair at work when he leaned to the right and felt a sharp pain in his lower back. At that time a medial branch block was ordered along with trigger point injections.

6. I reviewed an MRI scan report dated 05/05/08. Bulging discs were noted throughout the lumbar spine. There was a 5-mm to 6-mm left paracentral disc herniation at L1/L2 and a central disc protrusion at L2/L3. There was a central disc protrusion at L3/L4. At L4/L5 there was a paracentral disc herniation. At L5/S1 there was a central disc protrusion. The facets were noted to be normal at all levels, according to Dr. , the radiologist that reviewed these films.

INJURED EMPLOYEE CLINICAL HISTORY (Summary):

The injured employee was apparently sitting in a chair at work when he twisted and felt low back pain. He is xx years old. He underwent treatment with medications and fourteen sessions of physical therapy with work hardening. He had trigger point injections and right lumbar medial branch blocks from L1 to S1. After the injections, there was no indication as to what percent improvement was realized. There was no pre-injection confirmation that the facets were the pain generators. Specifically, there was no notice of specific increase in back pain with extension, but rather the notation indicated that motion was moderately weight-restricted in all directions due to pain. This does not specifically identify the particular pain pattern of exaggerated symptoms following extension. There was tenderness everywhere palpated about the entire back both before and after the facet injection, minimizing the value of that as a differential diagnostic indicator. The ODG Guidelines specifically indicate that no more than two levels should be injected at any given time, and in this case there were five levels injected. Also, the imaging study identifies the likely source of his pain, that being discogenic, with multilevel disc protrusions and herniations. Interestingly, the facet joints were all reported to be normal on the MRI scan.

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

There is insufficient clinical indication that the facet joints are the pain generators in this case as discussed above. I do not see sufficient evidence to warrant the lumbar medial branch blocks.

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.
- Medical judgment, clinical experience and expertise in accordance with accepted medical standards.
- Mercy Center Consensus Conference Guidelines.
- Milliman Care Guidelines.
- 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.)