



**INDEPENDENT REVIEW INCORPORATED**

Notice of Independent Review Decision  
**CORRECTED REPORT**  
 Corrected date of decision

**REVIEWER'S REPORT**

**DATE OF REVIEW:** 08/28/09

**IRO CASE #:**

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

Repeat Lumbar epidural steroid injections

**DESCRIPTION OF QUALIFICATIONS OF REVIEWER:**

M.D., board certified Neurologist and pain specialist, fellowship trained in Pain Medicine

**REVIEW OUTCOME:**

Upon independent review, I find that the previous adverse determination or determinations should be:

- Upheld (Agree)
- Overturned (Disagree)
- Partially Overturned (Agree in part/Disagree in part)

<i>Primary Diagnosis Code</i>	<i>Service Being Denied</i>	<i>Billing Modifier</i>	<i>Type of Review</i>	<i>Units</i>	<i>Date(s) of Service</i>	<i>Amount Billed</i>	<i>Date of Injury</i>	<i>DWC Claim #</i>	<i>Upheld Overturn</i>
			<i>Prosp.</i>						

**INFORMATION PROVIDED FOR REVIEW:**

1. TDI case assignment
2. Letters of denial dated 07/21/09 and 08/11/09
3. Reports of medical evaluation dated 04/25/08 and 11/11/08
4. Neurology evaluations dated 02/27/09 and 04/01/09
5. Radiology reports, 11/26/07 and 04/01/09
6. Nerve conduction study, 02/12/09
7. Impairment rating, 06/25/08 and 09/25/08
8. Pain management evaluation, 02/06/08
9. Functional Capacity Evaluation, 12/08/08
10. Evaluation of office visits, 04/13/08 through 05/11/09
11. Physical therapy evaluation and treatment, 05/20/08 through 07/20/09
12. Discharge summary dated 11/20/07

**INJURED EMPLOYEE CLINICAL HISTORY (Summary):**

This claimant was injured on xx/xx/xx and has undergone extensive evaluation and multiple consultations, but essentially has presented with a chronic lumbar radicular condition on the left side. She has undergone one lumbar epidural steroid injection, which reportedly did offer some partial/temporary benefit. An additional series of two lumbar epidural steroid injections has been requested. Apparently a second lumbar epidural steroid injection resulted in a vasovagal response that required abortion of the procedure.

Therefore, an additional two lumbar epidural steroid injections have been requested though denied because of “lack of objective evidence of radiculopathy.”

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

It is this reviewer’s opinion that the claimant is indeed presenting with symptoms consistent with left lumbar radiculopathy as has been the opinion of several of her consulting physicians, as well. Because the patient did have some benefit from the first lumbar epidural steroid injection, I believe that it would be perfectly reasonable for the claimant to continue with this series with appropriate care to try to reduce the likelihood of vasovagal response, etc.

It is reasonable to expect that a second lumbar epidural steroid injection may have more sustainable symptomatic relief for this claimant. Though this may not necessarily result in long-term symptomatic improvement if left by itself, it can certainly be expected to allow this claimant more immediate pain relief.

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

- 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.)
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