



Southwestern Forensic
Associates, Inc.

REVIEWER'S REPORT

DATE OF REVIEW: 01/15/09

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

Facet injections.

DESCRIPTION OF QUALIFICATIONS OF REVIEWER:

D.O., M.S., Board Certified 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 reviewed a 12/11/08 Utilization Review report by Dr..
2. I reviewed a 12/22/08 note from Dr..
3. I reviewed the results of a literature review, specifically an article from The of Pain on 01/23/07 indicating that paraspinal tenderness was seen to equate most with facet pain as opposed to facet loading.
4. I reviewed the 04/06/03 article in Pain Physician.
5. I reviewed the history and physical examination from the and Clinic dated 05/30/07 from Dr.. His impression was “HNP at L5/S1 without displacement, rule out discogenic pain; possible right L3/L4 through L5/S1 facet joint dysfunction, primarily L4/L5 and L5/S1; rule out right S1 radiculopathy; rule out right piriformis syndrome mimicking radiculopathy; cervicogenic pain, not addressed.”

INJURED EMPLOYEE CLINICAL HISTORY (Summary):

This is a xx-year-old female who was working as a when, on xx/xx/xx, while packing rolls of plastic bags, she was struck from behind with a forklift, reporting a

hyperextension injury to her neck and back and associated neck and back pain extending to the right shoulder and down the right leg. She did have chiropractic care with Dr.. She was most recently evaluated by Dr. on 11/18/08. He requested lumbar facet blocks. She apparently has had an MRI scan or some other form of neural imaging, as there is a diagnosis of an L5/S1 disc herniation noted. I do not have that report. However, a letter from Dr. indicates an MRI scan was performed on 07/23/07 and was significant for an annular tear and with minimal posterior herniation at L5/S1. I do not have any diagnostic studies available to me to that would or would not implicate the facets by way of a degenerative process or asymmetry or other pathologic change that might implicate the facet joints as being the pain generators. On her most recent examination of 11/18/08 she had full range of motion of the back. There is no specific notation made of increased pain with extension of the back, only pain coming up from a bent forward posture. This would be muscular, not facetal. She does have some positive straight leg raising on the right side with pain down to her foot with a positive Lasegue's sign, as well. There is tenderness on palpating the cervical facet joints but not the lumbar facet joints.

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

Facet joint pathology can account for nonradiating lower back pain. In this case we have radiating lower back pain, which is, in absolute terms, according to the ODG Guidelines, a contraindication to proceeding with the facet blocks. It does also appear as though there is another etiology for pain, that being a herniated disc at the L5/S1 level, which could account for the back pain and referred pain down the right leg. There are no imaging test results to implicate the facet joints. The tenderness reported over the lumbar paraspinal muscles is not exclusively indicated of a facet-mediated pain syndrome. Certainly muscle strains will cause tenderness over the facets as would referred pain from disc herniations. Therefore, it is my opinion there is nothing clinically identifiable that would suggest the facet joints are the pain generators in this case, and therefore, there is no indication that the utilization of lumbar facet blocks would be indicated at this point in time.

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.)