

<b>Case Number:</b>	CM13-0003370		
<b>Date Assigned:</b>	12/27/2013	<b>Date of Injury:</b>	05/18/2010
<b>Decision Date:</b>	03/06/2014	<b>UR Denial Date:</b>	07/10/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/25/2013

### HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Occupational Medicine and is licensed to practice in New York. He/she has been in active clinical practice for more than five years and is currently working at least 24 hours a week in active practice. The physician reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

### CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

39 year old clerk claiming injury from repetitive work 5/8/10, involving bilateral wrists, low back, soft tissues of the neck, upper back and left shoulder. She is on chronic narcotics, including Nucynta, MS Contin, and requests Voltaren gel and Senakot.

### IMR ISSUES, DECISIONS AND RATIONALES

The Final Determination was based on decisions for the disputed items/services set forth below:

**Senakot, #240:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 77.

**Decision rationale:** Narcotics are a common cause of constipation. Furthermore, Trazodone and her SSRI may also contribute to constipation. She is already on docusate sodium 250 mg, up from 100 mg per day. The Senakot has a different mechanism of action, and there is documentation that she continued to be constipated on the docusate alone. There is not documentation of success with the use of both in combination, so recommend denial of the Senakot.

**Voltaren 1% gel 100gm tube, #4:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 111-113.

**Decision rationale:** Topical NSAIDs are indicated for osteoarthritis and tendonitis, when impacting a joint amenable to its use (e.g. knee, elbow). It is recommended for short-term use, 4-12 weeks. Maximum dose should not exceed 32 grams per day. Request denied because of length of treatment and location it is used.