

<b>Case Number:</b>	CM13-0016267		
<b>Date Assigned:</b>	12/11/2013	<b>Date of Injury:</b>	07/24/2013
<b>Decision Date:</b>	02/10/2014	<b>UR Denial Date:</b>	08/15/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/26/2013

### 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 Family Medicine and is licensed to practice in California. 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:

This injured worker's date of injury was 07/24/'13. Her diagnosis is sprain/strain of the R hand/wrist from repetitive motion. On exam as documented in the physical therapist's report dated 08/02/13, there was mild swelling on the radial side of her right wrist. Testing range of motion radial direction mild limitation due to pain.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**wasabi ointment:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 11-113.

**Decision rationale:** This patient has chronic wrist pain. The medical records provided do not mention if the medication in question is controlling the pain, nor if there has been an improvement in function because of its use. In addition, the role of topical agents for chronic pain is not supported in peer reviewed long-term prospective clinical trials. The use of topical agents for chronic pain is largely experimental. Wasabi is a member of the horseradish family and when applied to the skin is an irritant. Its use is similar to capsaicin, which is referenced

below. Capsaicin is indicated when other proven modalities have not been successful. Wasabi ointment for this patient is non-certified based on the documentation provided.