

Case Number:	CM13-0016489		
Date Assigned:	03/03/2014	Date of Injury:	01/10/2008
Decision Date:	04/14/2014	UR Denial Date:	07/30/2013
Priority:	Standard	Application Received:	08/26/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Board Certified in Geriatrics 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 expert 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:

The injured worker is a 43 year old man with a date of injury of 1/10/08. He was seen for an initial orthopedic upper extremity evaluation and consultation on 5/3/13 for complaints of bilateral wrist and hand pain with loss of grip strength and numbness. His physical exam was significant for positive median nerve compression test, Phalen's test and Tinel's sign bilaterally with a mildly positive first CMC grind test. He had edema in both wrists with unrestricted movement of his shoulders, elbows, wrists, and fingers. X-rays showed no fracture and mild radiocarpal arthritic changes. He was diagnosed with bilateral hand and wrist pain and carpal tunnel syndrome. The treatment plan included requests for EMG/NCS, acupuncture, splints and topical creams. The topical creams are at issue in this review.

IMR ISSUES, DECISIONS AND RATIONALES

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

PRESCRIPTION OF CYCLOBENZAPRINE POWDER 10% 12GRAM, #120 GRAMS CREAM: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines TOPICAL ANALGESICS Page(s): 111-113.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 63-66, 111-112.

Decision rationale: The Expert Reviewer's decision rationale: This injured worker has chronic wrist and hand pain with an injury sustained in 2008. Per the chronic pain guidelines for muscle relaxant use, non-sedating muscle relaxants are recommended for use with caution as a second-line option for short-term treatment of acute exacerbations in patients with chronic low back pain. Efficacy appears to diminish over time and prolonged use can lead to dependence. Per the MTUS, topical analgesics are largely experimental with few randomized trials to determine efficacy or safety. Any compounded product that contains at least one drug or drug class that is not recommended is not recommended. Regarding topical cyclobenzaprine in this injured worker, the records do not provide clinical evidence to support medical necessity.

PRESCRIPTION OF GABAPENTIN POWDER 10%, 12 GRAM, #120GRAMS CREAM:

Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines TOPICAL ANALGESICS Page(s): 111-113.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 16-22,111-112.

Decision rationale: The Expert Reviewer's decision rationale: This injured worker has chronic wrist and hand pain with an injury sustained in 2008. Gabapentin has been shown to be effective for treatment of diabetic painful neuropathy and postherpetic neuralgia and has been considered as a first-line treatment for neuropathic pain. Per the MTUS, topical analgesics are largely experimental with few randomized trials to determine efficacy or safety. Any compounded product that contains at least one drug or drug class that is not recommended is not recommended. Regarding topical gabapentin in this injured worker, the records do not provide clinical evidence to support medical necessity.

PRESCRIPTION OF BLURBIPROFEN POWDER 20% 30 GRAM, #150GRAMS CREAM: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines TOPICAL ANALGESICS Page(s): 111-113.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 111-112.

Decision rationale: The Expert Reviewer's decision rationale: This injured worker has chronic wrist and hand pain with an injury sustained in 2008. Per the MTUS, topical analgesics are largely experimental with few randomized trials to determine efficacy or safety. Any compounded product that contains at least one drug or drug class that is not recommended is not recommended. There is little evidence to utilize topical NSAIDs for treatment of osteoarthritis of the spine, hip or shoulder and there is no evidence to support its use in neuropathic pain. Regarding topical blurbiprofen in this injured worker, the records do not provide clinical evidence to support medical necessity.

PRESCRIPTION OF TRAMADOL POWDER 20%, 30GRAM, #150GRAMS CREAM:
Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines TOPICAL ANALGESICS Page(s): 111-113.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 111-112.

Decision rationale: The Expert Reviewer's decision rationale: This injured worker has chronic wrist and hand pain with an injury sustained in 2008. Tramadol is a centrally acting analgesic reported to be effective in managing neuropathic pain. There are three studies comparing Tramadol to placebo that have reported pain relief, but this increase did not necessarily improve function. A recent Cochrane review found that this drug decreased pain intensity, produced symptom relief and improved function for a time period of up to three months but the benefits were small (a 12% decrease in pain intensity from baseline). Adverse events often caused study participants to discontinue this medication, and could limit usefulness. There are no long-term studies to allow for recommendations for longer than three months. Per the MTUS, topical analgesics are largely experimental with few randomized trials to determine efficacy or safety. Any compounded product that contains at least one drug or drug class that is not recommended is not recommended. Regarding topical tramadol in this injured worker, the records do not provide clinical evidence to support medical necessity.