

Case Number:	CM13-0018732		
Date Assigned:	12/27/2013	Date of Injury:	09/07/2010
Decision Date:	02/19/2014	UR Denial Date:	08/13/2013
Priority:	Standard	Application Received:	08/30/2013

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 Pain Management, has a subspecialty in Disability Evaluation, 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:

The claimant is 25 years old male with stated date of injury of 09/10/2010. According to claimant, as she was grabbing for a bottle of Perrier water out of a cabinet, the bottle fell, hit the floor, and shattered with the glass shards hitting the claimant's right eye and lacerating her right eye. She was bleeding at the time from her right eye. The manager took her over to [REDACTED]. She was bandaged there. She waited 4 to 5 hours at the hospital and was seen by a physician. Apparently, she did not like the assessment rendered by the emergency room physicians and the consulting ophthalmologist at [REDACTED] so she left the hospital and went to [REDACTED] where she was in the emergency room for at least eight hours. They admitted her and did surgery on her eye. She was hospitalized for three to four days. She then went to the [REDACTED] outpatient eye clinic every three to four days for one to two months then weekly for a month, then monthly. She has had at least two operations on her eye correcting the laceration as well as trying to correct her vision. The laceration actually lacerated the cornea and the sclera. She also had a lens implant. Apparently, the operation has not been very successful where she is basically blind in her right eye and she has a lot of pain in her right eye. The dermatologic problem is that the claimant states that she has had acne since the month of injury of September 2010 where she had redness and blisters with itching on her face. Eventually she saw [REDACTED] who gave her some antibiotic pills. She also used Sumaxin wash and clindamycin pads as well as Tretinoin cream 0.1 %. The claimant states she saw [REDACTED] twice. After six months her acne resolved according to the claimant leaving some small ice-pick scarring localized in the center of her left cheek. There is another report from [REDACTED], dated 02/15/2013 where th

IMR ISSUES, DECISIONS AND RATIONALES

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

Fioricet: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation website for Fioricet

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Barbiturate-containing Analgesic Agents (BCAs), Page(s): 23.

Decision rationale: The MTUS guidelines indicate that BCAs are not recommended for chronic pain. The potential for drug dependence is high and no evidence exists to show a clinically important enhancement of analgesic efficacy of BCAs due to the barbiturate constituents. There is a risk of medication overuse as well as rebound headache.. Therefore, the request for Fioricet is not a medical necessity.