

Case Number:	CM13-0021256		
Date Assigned:	11/08/2013	Date of Injury:	01/09/2007
Decision Date:	01/21/2014	UR Denial Date:	08/07/2013
Priority:	Standard	Application Received:	09/06/2013

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:

On January 9, 2007, the claimant was on the third step from the top of an eight-foot ladder. The ladder fell, and the claimant fell off into a trailer hitch. She apparently fell onto her back. It would appear that she did not hit her head or lose consciousness. Indeed, her initial complaints were referable, to the best of her recollection, to her lower back, right leg, neck and head. Following her initial evaluation in the [REDACTED] emergency room, she came under the care of the doctors at [REDACTED]. In addition to her initial musculoskeletal complaints, as described. She had symptoms in her upper extremities which, as we shall see, led to electrodiagnostic studies, "uncovering" what appeared to be bilateral carpal tunnel impingement. This subsequently led to surgical release of both upper extremities/carpal tunnels. The claimant does not recall any similar complaints prior to January 2007 although, as we shall see, the medical records may show something different. The claimant has had substantial improvement referable to these complaints with, at this point, total resolution of the numbness and tingling and no specific impairment of grip or coordination referable to median nerve entrapment. She has, however, for the past 5-1/2 years, had a series of ongoing and, by history, progressive complaints referable to a variety of "body parts." She has been under the care of [REDACTED] now for several years and has been taking Norco three to four times a day, on "good days," two days a week, taking it five to six times a day for "bad days," five days a week. She also takes Naprosyn and Tizanidine. These medications are well tolerated. Additional medications include Tramadol, three to four a day, which she takes for her headache. This provides good relief in addressing headaches, the claimant makes it perfectly clear to me (confirmed on several occasions with the interpreter) that her headache is holocephalic and related to her neck pain. That is to say, she will get "shoot

IMR ISSUES, DECISIONS AND RATIONALES

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

Fluocinonide cream 0.5% #60: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation www.drugs.com/cdl/fluocinonide-cream.html

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Medline Plus information.

Decision rationale: The California MTUS (Effective July 18, 2009) is mute on this topic. According to Medline Plus, Fluocinonide is used to treat the itching, redness, dryness, crusting, scaling, inflammation, and discomfort of various skin conditions. However, the medical record reviewed did not disclose any skin ailment and the treating physician stated in his report on numerous occasions " Inspection of the skin outside of affected area reveals no abnormalities." Therefore the request for Fluocinonide cream #60 is not medically necessary.