

Case Number:	CM13-0028278		
Date Assigned:	11/22/2013	Date of Injury:	10/25/2007
Decision Date:	01/30/2014	UR Denial Date:	08/26/2013
Priority:	Standard	Application Received:	09/23/2013

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 Toxicology 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:

The patient sustained an injury at work on 10/25/07 and has been diagnosed with post concussion syndrome, cervicgia, migraine, etc. This patient has been on various pharmaceutical agents including Namenda and Botox .The treatment in dispute is Namenda 10mg BID 90 days #180 x 1 year refill.

IMR ISSUES, DECISIONS AND RATIONALES

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

Namenda 10mg BID 90 days #180 x1 year refill: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.drugs.com/pro/namenda.html>.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Dailymed, <http://dailymed.nlm.nih.gov/dailymed/lookup.cfm?setid=b9f27baf-aa2a-443a-9ef-e002d23407ba#nmlm34067-9>, and Memantine for Prophylaxis of Chronic Tension-Type Headache-a double-blind, randomized, crossover clinical trial, Lindelof K, Bendtsen

Decision rationale: It is documented that patient had some positive effects with use of Namenda. Unfortunately the only indication for Namenda is Alzheimer's disease or dementia. According to the medical records provided for review, the patient does not have a diagnosis of

dementia. As per the drug information the only indication is for Alzheimer's disease. The request for Namenda 10mg BID 90 days #180 x1 year refill is not medically necessary and appropriate.