

<b>Case Number:</b>	CM13-0029658		
<b>Date Assigned:</b>	11/27/2013	<b>Date of Injury:</b>	06/23/2011
<b>Decision Date:</b>	02/04/2014	<b>UR Denial Date:</b>	09/12/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/25/2013

### 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 Addiction and Pediatrics, has a subspecialty in Toxicology and is licensed to practice in Massachusetts and 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 is a 47 year old female with date of injury on 6/23/11. The patient complains of bilateral knee pain. The patient underwent injections and other modes of therapy such as chiropractic therapy. The treatment in dispute is Terocin Pain Relief Lotion 4oz.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Terocin pain relief lotion 4oz:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 105, 112-113.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Salicylate Topicals Page(s): 111-117.

**Decision rationale:** the available documents it seems that patient has attained a plateau and stationary phase with regards to pain responses. In the submitted documents, there is no report of the specific responses to pharmacologic or interventional or conservative pain management procedures. However, as per MTUS guidelines, any combination with lidocaine topical alone or in combination is not as indication to treat the pain of knee . Topical lidocaine is only recommended for localized peripheral pain after there has been evidence of a trial of first-line therapy (tri-cyclic or SNRI anti-depressants or an AED such as gabapentin or Lyrica). Topical

lidocaine, in the formulation of a dermal patch (Lidoderm®) has been designated for orphan status by the FDA for neuropathic pain. Lidoderm is also used off-label for diabetic neuropathy. No other commercially approved topical formulations of lidocaine (whether creams, lotions or gels) are indicated for neuropathic pain. Non-dermal patch formulations are generally indicated as local anesthetics and anti-pruritics. Further research is needed to recommend this treatment for chronic neuropathic pain disorders other than post-herpetic neuralgia. Formulations that do not involve a dermal-patch system are generally indicated as local anesthetics and anti-pruritics. In February 2007 the FDA notified consumers and healthcare professionals of the potential hazards of the use of topical lidocaine. Those at particular risk were individuals that applied large amounts of this substance over large areas, left the products on for long periods of time, or used the agent with occlusive dressings. Systemic exposure was highly variable among patients. All the topical preparations are to be used as only an option if the conventional therapy failed. There is no documentation of how long the NSAIDs/PT etc were used and the specific response to those modes of therapy. Also as per literature, capsaicin, menthol, methylsalicylate could be systemically absorbed after topical application (Martin, et al. 2004). The request for Terocin pain relief lotion is not certified.