MAXIMUS Federal Services

Case Number:	CM13-0029860		
Date Assigned:	03/28/2014	Date of Injury:	08/17/2010
Decision Date:	04/25/2014	UR Denial Date:	08/30/2013
Priority:	Standard	Application Received:	09/25/2013

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 Occupational Medicine 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 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 patient is a 41 year-old female who was injured on 08/17/2010 while assisting a patient when she felt a pop in her right wrist area. She had right wrist surgery and she has had pain to right shoulder and elbow. Office note dated 08/28/2013 indicated the patient has had a difficult time losing weight that she had gained secondary to inactivity, inability to sleep secondary to the pain, as well as multiple mood disorders, all of which have contributed to her weight-loss resistance or weight gain. Review of systems revealed mild improvement in her chronic fatigue, improvement in sugar cravings, and improvement in weight-loss resistance medication weight-loss medication. She has no diabetes mellitus type 2, no hypothyroidism or hyperthyroidism. There is no shortness of breath; no pneumonia. She has no orthopnea, dyspnea on exertion, or paroxysmal nocturnal dyspnea. There is no history of myocardial infarctions. There is no dysuria, hematuria, frequency, hesitancy, or incontinence. Her musculoskeletal exam is positive for myalgia and arthralgia. She has positive decrease in libido, positive for menstrual cycle irregularities, positive for cognitive decline. She also has anxiety, depression, and insomnia. Her weight is 173 pounds and blood pressure is 120/82. There is no BMI documented. Her heart reveals regular, rate, and rhythm without significant murmurs, rubs, or gallops. She is tender to palpation over the mid epigastric region. The patient was diagnosed with 1) Weight-loss resistance secondary to work-related injury and chronic anemia; 2) H. pylori infection status post chronic non-steroidal anti-inflammatory use, possible peptic ulcer disease secondary to work-related injury; 3) Irritable bowel syndrome with constipation dominant secondary to work-related injury; 4) Vitamin D deficiency secondary to obesity status post work-related injury.

IMR ISSUES, DECISIONS AND RATIONALES

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

PHENTERMINE 2.5MG #60 FOR OBESITY: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation PHYSICIANSS' DESK REFERENCE, PHENTERMINE.

Decision rationale: Phentermine is indicated as a short-term adjunct (a few weeks) to a regimen of weight reduction based on exercise, behavioral modification, and caloric restriction for exogenous obesity in the presence of other risk factors such as diabetes, hypertension, or hyperlipidemia. After review of available medical records, while there is a documented BMI over 30, plans to participate in exercise, behavioral modification, or caloric restriction are not documented. It does not appear that the phentermine prescription is intended for short-term use of a few weeks. Significant cardiac risk factors do not appear to be present based on available documentation. Therefore, phentermine is non-certified.