

Case Number:	CM13-0035974		
Date Assigned:	12/13/2013	Date of Injury:	07/30/2003
Decision Date:	02/21/2014	UR Denial Date:	10/09/2013
Priority:	Standard	Application Received:	10/18/2013

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 Physical Medicine and Rehabilitation has a subspecialty in Interventional Spine 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 patient is a 46 year old male with a date of injury on 07/30/2003. The progress report dated 09/09/2013 indicates that the patient's diagnoses include: Anterior spinal artery compression syndrome, low back pain, neck pain, quadriplegia, C5-C7 incomplete, chronic pain. The patient has a C6 incomplete spinal cord injury resulting in a quadriplegia and neurogenic bowel and bladder. The patient presented with complaints of persistent neck and low back pain. He has neurogenic bowel and bladder and has chronic constipation in spite of taking several medications. He feels that it is not managed well. Exam findings include antalgic gait noted. The patient is using bilateral forearm crutches for ambulation. Stiffness and spasms noted in the cervical paraspinal and lumbar paraspinal muscles. Spasticity noted in the right upper extremity with flexion, contractures in the right, otherwise, no gross changes noted. The patient was continued on medications including Glycerin suppository once a day, Bisacodyl 5 mg p.o. every day, cyclobenzaprine 7.5 mg every 8 to 12 hours, Cymbalta 40 mg every 12 hours, Enemeez Mini enema 1 suppository daily, Lunesta 2 mg at night as needed, methadone 5 mg daily, Nucynta 50 mg daily, omeprazole 20 mg 1 daily, Senokot-S 1 to 2 daily, and lactulose 2 bottles and topiramate 50 mg p.o. 1 every 12 hours.

IMR ISSUES, DECISIONS AND RATIONALES

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

Refill Enemeez Mini Enema capsule, Standard, 1 Suppository Rectally every day #30, 3 refills: Overturned

Claims Administrator guideline: Decision based on MTUS ACOEM.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 77,127.

Decision rationale: This patient continues with chronic neck and back pain as well as history of C6 incomplete spinal cord injury resulting in a quadriplegia and neurogenic bowel and bladder. The patient has demonstrated symptoms of severe constipation that he has been struggling with despite several medications part of which is caused by the pain medication. MTUS page 77 under their heading of therapeutic trial of opioids, states that prophylactic treatment of constipation should be initiated. The Enemeez Mini enema capsule suppository appears to be reasonable in this patient as they continue to struggle with constipation from their pain medications as well as their diagnosis with a neurogenic bowel and bladder. Therefore, authorization is recommended.