

Case Number:	CM13-0036221		
Date Assigned:	12/13/2013	Date of Injury:	10/10/2011
Decision Date:	02/06/2014	UR Denial Date:	10/02/2013
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 Geriatrics and is licensed to practice in New York, Pennsylvania, and Washington. 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:

At issue in the review are the denial of naproxen and gabapentin in this 48 year old man who was a police officer who sustained an injury to his back on 10/10/11 while lifting a duffel bag. His current work status as of 8/27/13 was temporarily totally disabled. He has undergone radiographic studies including cervical and thoracic MRI in 6/12 showing annual bulges at T7 and C4-5 without cord impingement. He had chronic L4-5 lumbar radiculopathy. He has been treated with numerous medications targeting his symptoms including Norco, Lunesta, gabapentin, naproxen, zanaflex, silenor and Ambien. He has undergone epidural injections and L4-5 complete discectomy and prosthetic disc replacement on 5/30/13. The evaluation of 9/18/13 shows he has chronic pain rated at a 5/10. He was receiving Norco, Lunesta, naproxen and gabapentin targeting low back and cervical pain with restricted range of motion on physical exam. His diagnoses were lumbar radiculopathy and backache. He subsequently underwent a cervical facet nerve block on 10/21/13 after the denial date.

IMR ISSUES, DECISIONS AND RATIONALES

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

Naproxen 500mg: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 66-73.

Decision rationale: This 48 year old injured worker has chronic back and neck pain with limitations in range of motion noted on physical examination. His medical course has included numerous diagnostic and treatment modalities including surgery and long-term use of several medications including narcotics, naproxen and gabapentin. Per the chronic pain guidelines for chronic low back pain, NSAIDs are recommended as an option for short-term symptomatic relief. Likewise, for the treatment of long-term neuropathic pain, there is inconsistent evidence to support efficacy of NSAIDs. The medical records fail to document any improvement in pain or functional status to justify long-term use. He is also receiving opioid analgesics and the naproxen is not medically necessary.

Gabapentin 300mg: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 16-22.

Decision rationale: This 48 year old injured worker has chronic back and neck pain with limitations in range of motion noted on physical examination. His medical course has included numerous diagnostic and treatment modalities including surgery and long-term use of several medications including narcotics, naproxen and gabapentin. Per the chronic pain guidelines for chronic non-specific axial low back pain, there is insufficient evidence to recommend the use of gabapentin. After initiation of treatment, there should be documentation of pain relief and improvement in function as well as documentation of side effects. He continued to have pain with no functional improvement. The medical records fail to document any improvement in pain, functional status or side effects to justify long-term use. He is also receiving opioid analgesics and the gabapentin is not medically necessary.