

<b>Case Number:</b>	CM13-0036438		
<b>Date Assigned:</b>	12/13/2013	<b>Date of Injury:</b>	01/31/2005
<b>Decision Date:</b>	04/23/2014	<b>UR Denial Date:</b>	09/21/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/21/2013

### 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 Geriatrics, 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 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 injured worker is a 44 year old female with a date of injury of 1/31/05. She has a long history of bloating, epigastric burning, and constipation dating back at least to December 2011. Her gastrointestinal diagnoses include constipation and internal hemorrhoids. The doctor's notes from 2012 indicate that she was controlling her constipation with MiraLAX and Colace. Her abdominal exams were benign with a soft abdomen and no masses or tenderness. She is status post upper endoscopy in April 2012 which showed mild generalized gastritis, but was otherwise completely normal. At issue in this review is the prescription for MiraLAX.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**MIRALAX.:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation McKay SL, Fravel M, Scanlon C. Management of constipation. Iowa City (IA): University of Iowa Gerontological Nursing Interventions Research Center, Research Translation and Dissemination Core; 2009 Oct. 51 p.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation MiraLAX drugs information and management of chronic constipation in adults.

**Decision rationale:** It is not documented whether this injured worker has been prescribed an opioid analgesic which can cause constipation. MiraLAX is typically prescribed for occasional constipation, but can be used in chronic constipation. Laxatives are used after patient education, behavior modification, and dietary changes have been tried. The records do not document that these modalities were trialed prior to using long-term MiraLAX. The records do not justify medical necessity, and the request is noncertified.