

Case Number:	CM13-0036986		
Date Assigned:	12/13/2013	Date of Injury:	05/27/2008
Decision Date:	02/13/2014	UR Denial Date:	10/08/2013
Priority:	Standard	Application Received:	10/22/2013

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 Family Practice and is licensed to practice in Texas. 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 52-year-old female who reported injury on 05/27/2008. The mechanism of injury was being the patient was walking into the waiting room and a child tripped her. The patient was noted to undergo an ankle lateral ligament reconstruction with allograft tendon on 05/21/2013. The patient's diagnoses were noted to be pain in joint of ankle and foot. The request was made for a medication refill.

IMR ISSUES, DECISIONS AND RATIONALES

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

Tramadol 50mg every 6 hours: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 80.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids,Ongoing Management Section Page(s): 78, 82, 93, 94 and 113.

Decision rationale: The California MTUS states central analgesics drugs such as Tramadol (Ultram®) are reported to be effective in managing neuropathic pain and it is not recommended as a first-line oral analgesic. The California MTUS recommend that there should be documentation of the 4 A's for Ongoing Monitoring including analgesia, activities of daily living, adverse side effects and aberrant drug taking behavior. The patient was noted to be taking

1 - 2 narcotics a day and the pain was stated to be well controlled with them. The clinical documentation submitted for review failed to provide documentation of the 4A's to support ongoing usage of the medication. The documentation failed to indicate a quantity. Given the above, the request, as submitted, for Tramadol 50mg every 6 hours as needed, is not medically necessary.