

<b>Case Number:</b>	CM13-0041293		
<b>Date Assigned:</b>	12/20/2013	<b>Date of Injury:</b>	08/07/1998
<b>Decision Date:</b>	03/10/2014	<b>UR Denial Date:</b>	09/27/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/14/2013

### 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 Neuromuscular Medicine and is licensed to practice in Mississippi. 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 represented [REDACTED] employee with an industrial injury from August 7, 1998, with complaint of chronic left elbow pain and enthesopathy. She also has complaints of fibromyalgia and pain in other areas from working as a claims analyst, typing repetitively all day.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Exoten C for pain relief:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-112.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Methyl salicylate and Topical Analgesics Sections Page(s): 105, 111-113. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Elbow, Topical analgesics

**Decision rationale:** The California MTUS guidelines state that topical analgesics are primarily recommended for neuropathic pain when trials of antidepressants and anticonvulsants have failed. Guidelines also state, "any compounded product that contains at least one drug (or drug class) that is not recommended is not recommended as a whole." Exoten-C is a combination of

salicylate, menthol and capsaicin. The Official Disability Guidelines do not recommend Menthol as a topical analgesic. Therefore, the request is not certified.