

<b>Case Number:</b>	CM13-0041546		
<b>Date Assigned:</b>	12/20/2013	<b>Date of Injury:</b>	10/31/2012
<b>Decision Date:</b>	02/12/2014	<b>UR Denial Date:</b>	10/04/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/29/2013

### 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 Anesthesiology, has a subspecialty in Pain Management and is licensed to practice in Georgia. 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 claimant presented with neck pain and left shoulder pain following a work related injury on 10/31/2012. The claimant reported intermittent neck pain, numbness and tingling radiating into the bilateral upper extremity. The physical exam was significant for tenderness and spasm at the cervical and thoracic spine, shoulder/upper arm tenderness and spasm bilaterally over the upper trapezius and rhomboid, elbow/forearm tenderness and spasm over the left flexor muscle and extensor. The provider prescribed a compounded medication of Fluribprofen/Lidocaine/Amitriptyline/Gabapentin/Cyclobenzaprine/Tramadol for left upper extremity pain. The medical records note that the claimant is not taking any medications. The claimant was diagnosed with cervical spine sprain/strain with upper extremity paresthesia, rule out herniated nucleus pulposus/radiculopathy versus other neuropathy versus brachial plexopathy versus traction neuropathy, Thoracic spine sprain/strain rule out internal derangement, stress, rule out anxiety/depression/posttraumatic stress disorder, from second date of injury, left forearm fracture with ORIF.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Pharmacy:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Chronic Pain Medical Treatment Guidelines, Section 8..

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Chronic Pain Medical Treatment Guidelines. .

**Decision rationale:** It seems a claim was made for pharmacy. For this case the assumption will be made that the claim is for a pharmacy compounded topical medication of Fluribprofen/Lidocaine/Amitriptyline/Gabapentin/Cyclobenzaprine/Tramadol. The claim is not medically necessary. According to California MTUS, 2009, chronic pain, page 111 California MTUS guidelines does not cover "topical analgesics that are largely experimental in use with a few randomized controlled trials to determine efficacy or safety. Any compounded product that contains at least one drug or drug class that is not recommended, is not recommended". Additionally, Per CA MTUS page 111 states that topical analgesics such as lidocaine are "recommended for localized peripheral pain after there has been evidence of a trial of first-line therapy (anti-depressants or AED)...Only FDA-approved products are currently recommended. Non-neuropathic pain: Not recommended. The claimant was not diagnosed with neuropathic pain and there is no documentation of physical findings or diagnostic imaging confirming the diagnosis. The medication was prescribed for left upper extremity pain which is non-neuropathic pain syndrome. Per CA MTUS topical analgesic such as Lidocaine is not recommended for non-neuropathic pain. Finally, the claimant did not fail first line medications as the medical records noted that the was not on any medications.