

<b>Case Number:</b>	CM13-0053897		
<b>Date Assigned:</b>	12/30/2013	<b>Date of Injury:</b>	06/15/1991
<b>Decision Date:</b>	05/21/2014	<b>UR Denial Date:</b>	10/25/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/08/2013

### 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 Occupational Medicine and is licensed to practice in California. 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 patient has submitted a claim for lumbar spine pain associated with an industrial injury date of June 15, 1991. The treatment to date has included oral analgesics, spinal cord stimulator, physical therapy, and lumbar surgery. A utilization review dated October 25, 2013 denied the request for Oxycontin 40mg 1 tab po bid #60 for lumbar spine pain due to no clear indication of increased functionality with the use of opioid medications prescribed and concomitant use of lorazepam and Nuvigil. The patient is currently receiving a total of 152 MED of opioids daily, exceeding the recommended dose of 120 MED. The medical records from 2013 were reviewed. The record showed bilateral low back pain radiating to the buttocks. Examination of the lumbar spine showed tenderness over the lumbar paraspinal muscles overlying the bilateral L3-S1 facet joints and bilateral sacroiliac joint regions. There was limitation of motion in all directions and lumbar discogenic provocative maneuvers were positive. Sacroiliac provocative maneuvers, Gaenslen's, Patrick's maneuver and pressure at the sacral plexus were positive bilaterally. The current medications include lorazepam, Wellbutrin, Oxycontin, Dilaudid, trazodone, Abilify, Lexapro, and Nuvigil.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**1 Oxycontin 40mg 1 tab po bid # 60 for the lumbar spine pain: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG),

Goodman and Gilman's The Pharmacologic Basis of Therapeutics, 11th ed. McGraw Hill, 2006, Physician's Desk Reference, 65th ed., www.Rxlist.com, drugs.com, Epocrates Online, www.online.epocrates.com, Monthly prescribing refer

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 82,86.

**Decision rationale:** As stated in the California MTUS Chronic Pain Medical Treatment Guidelines, the total daily dose of opioids should not exceed 120 mg oral morphine equivalents and should only be increased beyond this only after pain management consultation has been done. The MTUS also states that opioid tolerance develops with the repeated use of opioids and brings about the need to increase the dose and may lead to sensitization. In this case, the patient has been on prolonged opioid intake dating as far back as January 2013. However, daily opioid intake total is 152 MED which exceeds the recommended daily dose of 120mg. Continued use of high doses of opioids is not recommended due to risk of developing tolerance. Moreover, functional improvements with opioid use were not documented. Therefore, the request for Oxycontin 40mg 1 tab po bid #60 for lumbar spine pain is not medically necessary.