

<b>Case Number:</b>	CM13-0054287		
<b>Date Assigned:</b>	12/30/2013	<b>Date of Injury:</b>	05/22/2000
<b>Decision Date:</b>	06/12/2014	<b>UR Denial Date:</b>	10/23/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/19/2013

### 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 Neurology, has a subspecialty in Neuromuscular 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 is a 51 year old female who sustained a work-related injury on May 22, 2000. Subsequently she developed chronic back pain. According to a note dated on June 21, 2013, the patient was complaining of a dull aching low back pain. Her physical examination showed that the patient was working without assistance. The patient was diagnosed with lumbar radiculopathy. The patient was with Flexeril, Ultram, Anaprox, and Prilosec.

### IMR ISSUES, DECISIONS AND RATIONALES

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

#### **A CT SCAN OF THE LUMBAR SPINE:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303-304.

**Decision rationale:** According to MTUS guidelines, CT scans of the lumbar spine are able to identify low back pathology in the case of disc protrusion, spinal stenosis, post laminectomy syndrome, and Cauda Equina syndrome. CT or MRI of the back is indicated when cauda equina tumor, infection, or fracture are strongly suspected and plain film radiographs are negative. There is no documentation supporting that the patient developed a serious condition or has had a

dramatic change of his condition requiring a new imaging study. Therefore, the request for a CT scan of lumbar spine is not medically necessary.

**PRILOSEC 20MG:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 68.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 102.

**Decision rationale:** According to MTUS guidelines, Omeprazole is indicated when NSAIDs are used by patients with intermediate or high risk for gastrointestinal events. The risk factors include (1) being over the age of 65; (2) having a history of peptic ulcer, GI bleeding or perforation; (3) concurrently using ASA, corticosteroids, and/or an anticoagulant; or (4) taking high dose/multiple NSAID (e.g., NSAID + low-dose ASA). Recent studies tend to show that H. Pylori does not act synergistically with NSAIDs to develop gastroduodenal lesions. There is no documentation in the patient's chart supporting that she is at intermediate or high risk for developing gastrointestinal events. As such, the request is not medically necessary.

**TRANSDERMAL CREAM: FLURBIPROFEN 25%, DICLOFENAC 10%, 120GMS:**  
Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 111.

**Decision rationale:** The requested topical analgesic is formed by the combination of Flurbiprofen 25% and Diclofenac 10%. According to the MTUS Chronic Pain Medical Treatment Guidelines, topical analgesics are largely experimental in use with few randomized controlled trials to determine efficacy or safety. Many agents are combined to other pain medications for pain control. There is limited research to support the use of many of these agents. Furthermore, according to MTUS guidelines, any compounded product that contains at least one drug or drug class that is not recommended is not recommended. The topical analgesic contains Diclofenac, which is not recommended by MTUS as a topical analgesic. Furthermore, there is no documentation of failure or intolerance of first line oral medications for the treatment of pain. As such, the request is not medically necessary.

**TRANSDERMAL CREAM: CAPSAICIN 0.0375%, MENTHOL 10%, CAMPHOR 2.5%, TRAMADOL 20%, 120GMS:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 93, 111.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 111.

**Decision rationale:** The requested topical analgesic is formed by the combination of Capsaicin 0.0375%, Menthol 10%, Camphor 2.5%, and Tramadol 20%. According to the MTUS Chronic Pain Medical Treatment Guidelines, topical analgesics are largely experimental in use with few randomized controlled trials to determine efficacy or safety. Many agents are combined to other pain medications for pain control. There is limited research to support the use of many of these agents. Furthermore, according to MTUS guidelines, any compounded product that contains at least one drug or drug class that is not recommended is not recommended. The topical analgesic contains Capsaicin, which is not recommended by MTUS as a topical analgesic. Furthermore, there is no documentation of failure or intolerance of first line oral medications for the treatment of pain. As such, the request is not medically necessary.