

Case Number:	CM13-0058264		
Date Assigned:	12/30/2013	Date of Injury:	04/08/1998
Decision Date:	05/02/2014	UR Denial Date:	11/10/2013
Priority:	Standard	Application Received:	11/26/2013

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 Anesthesiology and Pain Management, and is licensed to practice in Florida. 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 injured worker is a 37-year-old male who reported an injury on 4/8/98. The mechanism of injury was not provided in the medical records for review. A clinical note dated 10/29/13 indicated that the injured worker reported increased left sciatic joint pain that was worse in the mornings and at night, requiring the use of Norco and Soma regularly. Upon physical exam, the injured worker was noted to have localized pain at the sacroiliac joint on the left side. Range of motion allowed for 90 degrees of flexion at the hips with forward reach to the ankles, extension of 20 degrees, and lateral bending of 30 degrees bilaterally. Straight leg raising is negative. Neurologic exam of the lower extremities is intact with regard to motor strength, sensation, and deep tendon reflexes. Diagnoses are noted as L5-S1 anterior lumbar interbody fusion on 3/25/10, greater trochanteric bursitis of the left hip, and left sacroiliitis. The injured worker responded well to the sacroiliac joint injection in the past. The doctor recommended this be repeated. The injured worker is to follow up in six weeks to see how it worked out. The prescriptions for Norco and Soma need to be refilled as needed.

IMR ISSUES, DECISIONS AND RATIONALES

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

SOMA: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 63-66.

Decision rationale: The California MTUS guidelines state that Soma is not indicated for longer than a 2-3 week period. Soma is a commonly prescribed, central acting skeletal muscle relaxant. Guidelines state that abuse has been noted for sedative and relaxant effects. The documentation provided for review did not give any subjective or objective findings for the request for the Soma. The Soma request did not come with dosage amount or for how long the medication is to be given. The injury was noted in 1998. The initial date of the start of the Soma was not given. The time frame of the Soma was not given in the medical records for review. Therefore, the request for Soma is non-certified.

Norco: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 75.

Decision rationale: The California MTUS guidelines recommend short-acting opioids such as Norco for controlling chronic pain. For ongoing management, there should be documentation of analgesia, activities of daily living, adverse side effects, and aberrant drug taking behavior. The documentation provided for review did not include this information. The documentation did not include drug testing. The documentation provided for review did not give any pain levels prior to or after taking the Norco. Therefore, the request for Norco is non-certified.