

Case Number:	CM13-0058340		
Date Assigned:	04/25/2014	Date of Injury:	09/01/2012
Decision Date:	06/12/2014	UR Denial Date:	11/15/2013
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 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:

This is a 37-year-old male with a date of injury of 09/01/2012. The patient's injuries include left shoulder, left elbow, right buttocks, right sacroiliac (SI) joint, right posterior thigh and lumbar spine. The patient's diagnoses include lumbar degenerative disc disease, myofascial pain syndrome of the lumbar paraspinal muscles and development of chronic pain syndrome with sleep and mood disorder. On 10/03/2013, there is a documented report of the patient complaining of a stabbing 8/10 pain with cramping in bilateral lower extremities. According to the patient's medical record he describes an episode of an "electric shock" type pain, which caused him to fall. There is additional information regarding how this patient continues to experience severe pain associated with leg cramps and shooting neuropathic pain. The patient was prescribed gabapentin for neuropathic shooting pain and bilateral lower extremity muscle cramping. On 11/27/2013, there is documented evidence of a normal neurologic examination and a normal musculoskeletal examination without evidence of sensory deficit. This patient was also noted to have been hospitalized for diabetic ketoacidosis (DKA) and newly diagnosed type 2 diabetes mellitus on 11/08/2013.

IMR ISSUES, DECISIONS AND RATIONALES

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

ONE (1) GABAPENTIN 300MG #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines (MAY 2009).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines ANTI-EPILEPSY DRUGS (AEDs) AND GABAPENTIN (NEURONTIN) Page(s): 16-1 AND 49.

Decision rationale: The Chronic Pain Guidelines indicate that Anti-Epilepsy Drugs (AED's) such as gabapentin are recommended for neuropathic pain with a "lack of consensus on the treatment of neuropathic pain in general due to heterogeneous etiologies, symptoms, physical signs and mechanisms." Neuropathic pain is a disorder involving the nerve or nerve fibers in the peripheral or central nervous system as the source of pain. It often co-exists with inflammatory and nociceptive pain. Nociceptive pain is the type of pain detected by sensory nerves called nociceptors. It results from activity in neural pathways secondary to tissue damage. Neuropathic pain can arise following a nerve injury and cause a nerve dysfunction. This can result in numbness, weakness and loss of deep tendon reflexes in the affected area. Neuropathic conditions also cause aberrant symptoms of spontaneous pain sometimes described as burning, shooting or shock-like pain. Clinical evaluation and assessment typically includes confirming the diagnosis of neuropathic pain by history, physical examination and testing. There is some documented evidence to suggest that this patient may have a component of neuropathic pain; however, this is not confirmed by physical examination findings or any kind of objective testing. Therefore the above listed issue is considered to be not medically necessary.