

Case Number:	CM13-0058565		
Date Assigned:	12/30/2013	Date of Injury:	08/05/2007
Decision Date:	06/16/2014	UR Denial Date:	10/28/2013
Priority:	Standard	Application Received:	11/27/2013

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 Internal Medicine and is licensed to practice in Arizona. 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 63-year-old man with a medical history of multiple skin lesions who sustained a work-related injury dated 8/5/07 with resulting chronic pain in his cervical, lumbar spine and shoulder. The most recent note from the primary provider is dated 2/6/12. He complains of continued pain in the cervical spine and upper extremity with pain in the paravertebral muscles. The diagnosis includes discogenic disease of the cervical spine, lumbar discopathy with neural compression and lumbar radiculitis left greater than right, and left shoulder pain status post surgery. He is being treated with naproxen, tizanidine and omeprazole. The continued use of tizanidine and omeprazole was denied during utilization review dated 10/28/13.

IMR ISSUES, DECISIONS AND RATIONALES

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

60 Omeprazole 20mg: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 2 General Approach to Initial Assessment and Documentation, Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 68, 69.

Decision rationale: There is no documentation that the patient has had any gastrointestinal symptoms from the use of non-steroidal anti-inflammatory drugs (NSAIDs) or that they have any risk factors for gastrointestinal events. According to the MTUS the use of a proton pump inhibitor is appropriate when the injured worker is taking an NSAID and has high risk factors for adverse gastrointestinal events which include age older than 65, history of peptic ulcer, gastrointestinal bleeding or perforation, concurrent use of acetylsalicylic acid (ASA), corticosteroids or an anticoagulant of high dose NSAID. The patient does not have any symptoms that would suggest gastritis and there is no documentation that he has any risk factors for adverse gastrointestinal events. The use of a proton pump inhibitor, omeprazole is not medically necessary.

30 Tizanidine HCL 4mg: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 2 General Approach to Initial Assessment and Documentation, Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 64-66.

Decision rationale: According to the MTUS section on chronic pain muscle relaxants (such as tizanidine) are recommended with caution as a second-line option for short-term treatment of acute exacerbations in patients with chronic low back pain (LBP). Muscle relaxants may be effective in reducing pain and muscle tension and increasing mobility. In most cases of LBP they show no benefit beyond non-steroidal anti-inflammatory drugs (NSAIDs) in pain and overall improvement and offer multiple side effects including sedation and somnolence. Tizanidine is a centrally acting alpha₂-adrenergic agonist that is Food and Drug Administration (FDA) approved for management of spasticity, unlabeled use for low back pain. The side effects include somnolence, hypotension and weakness. Sedation may be worse with patient's taking concurrent central nervous system (CNS) depressants (such as klonopin). In this case, the patient was last noted to be taking tizanidine 2/6/12, the continued use of a muscle relaxant is not medically necessary.